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ABSTRACT

This study investigated the characteristics of perfectionistic gifted adolescents in a rural middle school, how they perceived their perfectionism, the influences on their perfectionism, and the consequences of their perfectionist behaviors. Qualitative and quantitative methods of data collection were employed to gather data from 20 gifted adolescents identified as having perfectionist tendencies. Findings support the multidimensional theory of perfectionism, which states that perfectionism exists on a continuum with healthy to dysfunctional behaviors. Several differences existed between the healthy perfectionists and the dysfunctional perfectionists. Health perfectionists possessed an intense need for order and organization; displayed self-acceptance of mistakes; enjoyed high parental expectations; demonstrated positive ways of coping with their perfectionist tendencies; had role models who emphasized doing one's "best"; and viewed personal effort as an important part of their perfectionism. Dysfunctional perfectionists lived in a state of anxiety about making errors; had extremely high standards; perceived excessive expectations and negative criticism; questioned their own judgments; lacked effective coping strategies; and exhibited a constant need for approval. Family, teacher, and peer influences on perfectionism were perceived as mostly positive for the healthy perfectionists, but negative for the dysfunctional perfectionist. Appendices contain the Goals and Work Habits Survey and the Empowering Gifted Behavior Scale. (Contains over 200 references.) (Author/CR)

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Dr. Patricia A. Schuler is a therapist at *Creative Insights,* a counseling and educational consulting practice in Rensselaer, New York that specializes in working with gifted children and adolescents, and teacher/counselor training. Her educational background includes a master's degree in gifted education, a master's degree in counseling psychology, and a doctoral degree in Educational Psychology with an emphasis on the gifted and talented from the University of Connecticut. She has had over ten years experience in public and private schools as a regular classroom teacher and a teacher in gifted and talented programs. She worked as an Examination Services Specialist for the New York State Department of Education. Currently, she is a Board member of Advocacy for Gifted and Talented Education in New York State, Inc. (AGATE), and a consultant regarding gifted education to school districts. Underachievement, the social and emotional needs of the gifted, learning disabled/gifted, and the highly gifted are areas of intense interest and research for Dr. Schuler.

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ABSTRACT

This study investigated the characteristics of perfectionistic gifted male and female adolescents in a rural middle school, how they perceived their perfectionism, the influences on their perfectionism, and the consequences of their perfectionistic behaviors in the context of their rural middle school experiences.

Qualitative and quantitative methods of data collection were employed to gather data from 20 gifted male and female adolescents identified as having perfectionistic tendencies. Semi-structured interviews, record and document review, self-report teacher survey, and participant observation were used to identify factors that may influence the perceptions and behaviors of this population.

Findings from this study confirm the theoretical proposition that perfectionism is a characteristic of many gifted adolescents. In this study, 87.5% of gifted adolescents in accelerated courses in a rural middle school were identified as having perfectionistic tendencies. Results support the multidimensional theory of perfectionism, which states that perfectionism exists on a continuum with healthy to dysfunctional behaviors (Hamachek, 1978). Several differences exist between the healthy perfectionists and the dysfunctional perfectionists. Healthy perfectionists possessed an intense need for order and organization; displayed self-acceptance of mistakes; enjoyed high parental expectations; demonstrated positive ways of coping with their perfectionistic tendencies; had role models who emphasize doing one's "best"; and viewed personal effort as an important part of their perfectionism. The dysfunctional perfectionists lived in state of anxiety about making errors; had extremely high standards; perceived excessive expectations and negative criticisms from others; questioned their own judgments; lacked effective coping strategies; and exhibited a constant need for approval.

Family, teacher, and peer influences on perfectionism were perceived as mostly positive for the healthy perfectionists, but negative for the dysfunctional perfectionists. The impact of gender roles was not found as an influence. The perceived lack of challenge by a majority of the perfectionists was manifested in their enormous efforts to make their school work perfect, while exerting minimal intellectual effort and receiving high grades in return. Teacher difficulty in identifying mild perfectionistic distress may be due to the perception of perfectionistic gifted adolescents as being "model students" who have good school adjustment. Based on the findings of this study, suggestions for parents, teachers, counselors, and school systems were delineated to assist them in recognizing and helping gifted adolescents deal with their perfectionistic tendencies.

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EXECUTIVE SUMMARY

Introduction

Perfectionism, which is a combination of thoughts and behaviors generally associated with excessively high standards or expectations for one's own performance (Burns, 1980; Hamachek, 1978), has been recognized as a common emotional trait of giftedness (Adderholdt-Elliott, 1991; Clark, 1992; Hollingworth, 1926; Kerr, 1991; Roedell, 1984; Silverman, 1993; Strang, 1951; Whitmore, 1980).

Gifted adolescents differ from average adolescents not only in intellectual development, but also in social and emotional development (Colangelo & Davis, 1991; Gallagher, 1995; Hollingworth, 1926; Piechowski, 1991). Some of the commonly mentioned social and emotional traits of gifted adolescents include: emotional intensity and reactivity, heightened sensitivity, uneven development of intellectual and emotional areas, feeling different, and perfectionism (Janos & Robinson, 1985; Lovecky, 1992; Roedell, 1984; Roeper, 1982; Silverman, 1983; Tolan, 1989).

Just as most adolescents have to cope with the passage from childhood to adulthood, so do gifted adolescents; however, they face additional adjustment challenges, including: ownership of their abilities, dissonance between reality and expectations, taking risks, competing expectations of others, impatience, and premature identity (Buescher & Higham, 1989). For some adolescents, being gifted can make them more vulnerable to additional stress and social problems. They may have a strong desire for social acceptance at the same time they are receiving mixed messages to either excel or subjugate their talents (Betts, 1986; Buescher, 1984; Coleman & Cross, 1988). Perfectionism can exacerbate this desire for recognition and acceptance (Buescher, 1991; Kline & Short, 1991a, 1991b).

For gifted male and female adolescents with perfectionistic tendencies who live in a rural environment, attending a rural school may play an important role in how they view their perfectionism. The purpose of this study was to explore the characteristics of perfectionistic gifted male and female adolescents, how they perceive their perfectionism, and the consequences of their perfectionistic behaviors in the context of their rural school experience.

Perfectionism

The Construct of Perfectionism

In order to understand perfectionistic gifted adolescents, one must first examine the construct of perfectionism and then its relationship to gifted children and adolescents. A literature search indicated that there is a lack of agreement as to perfectionism's inherent nature. While several personality theorists view perfectionism as a healthy and salient part of human development (Adler, 1973; Dabrowski, 1972; Lazarfeld, 1991; Maslow, 1970), others view it as negative and destructive (Burns, 1980; Pacht, 1984).

Hamachek (1978) agreed with those who believe that perfectionism can be regarded as a positive influence. He viewed perfectionism as a manner of behaving and a manner of thinking about the behavior, and described two types of perfectionism, normal and neurotic, that form a continuum of perfectionistic behaviors. Normal perfectionists are those who "derive a very real sense of pleasure from the labors of a painstaking effort and who feel free to be less precise as the situation permits" (p. 27). Neurotic perfectionists, on the other hand, "are unable to feel satisfaction because in their own eyes they never seem to do things good enough to warrant that feeling" (p. 27). Hamachek stated that there are six specific, overlapping behaviors associated with perfectionism that describe both normal and neurotic perfectionists. The difference lies in the duration and intensity of these behaviors. They include: (a) depression, (b) a nagging "I should" feeling, (c) shame and guilt feelings, (d) face-saving behavior, (e) shyness and procrastination, and (f) self-deprecation.

According to Pacht (1984) and Burns (1980), perfectionists are those who measure their self-worth in terms of accomplishment and productivity; the drive to excel is self-defeating. Perfectionistic tendencies are distortions in one's thinking that can be related to a variety of psychological maladjustments. However, one cannot conclude from the research literature that perfectionism causes destructive psychological conditions or that it is necessarily destructive. Hamachek (1978) viewed these types of linkages as consequences of neurotic perfectionism, while normal perfectionism is linked to healthy consequences. Likewise, Whitmore (1980) believed perfectionism can be a positive force for achievement or a negative force for underachievement.

Hamachek's construct of perfectionism was used in this study to examine the characteristics and perceptions of perfectionistic gifted adolescents in a rural environment. Whether they viewed their perfectionistic tendencies as healthy or unhealthy, as well as other manifestations of their perfectionism, was investigated by the researcher.

Assessment of Perfectionism

Just as the nature of perfectionism has been inconsistent, so too has its measurement. Throughout the 1980s, the Burns Perfectionism Scale (1980) was used, but it is limited by its unidimensional focus on personal standards and concern over mistakes. Hewitt and Flett (1989) developed the Multidimensional Perfectionism Scale that emphasizes the interpersonal aspects of perfectionism. This instrument produces three scores of self-oriented, other-oriented, and socially prescribed perfectionism. Frost, Marten, Lahart, and Rosenblate (1990) developed a perfectionism questionnaire, also called the Multidimensional Perfectionism Scale, which examined the intrapersonal nature of perfectionism based on Hamachek's construct of perfectionism. The major dimensions of this measure include: concern over making mistakes, high personal standards, the perception of high parental criticism, the doubting of the quality of one's actions, the perception of high parental expectations, and a high preference for order and organization (Frost et al., 1990, p. 449). Results of several studies (Parker, 1997; Parker & Mills, 1996; Parker & Stumpf, 1995; Schuler & Siegle, 1994) support the use of the Multidimensional Perfectionism Scale (MPS) to measure the construct of perfectionism in academically talented children and adolescents.

Parker (1997) stated that a cluster analysis of scores from the Multidimensional Perfectionism Scale (Frost et al., 1990) indicated the existence of three perfectionistic groups: a nonperfectionistic type, a healthy perfectionistic type, and a dysfunctional or neurotic type. The nonperfectionistic type was characterized on the MPS by low scores on organization, personal standards, perceived parental expectations, and the total perfectionism score. The healthy perfectionist was characterized as having a low concern about making mistakes, low doubts about actions, low levels of perceived parental criticism, the highest

amount of organization, and a moderate total perfectionism score. The dysfunctional or neurotic perfectionist type scored highest on concern over mistakes, personal standards, parental expectations, doubts about actions, perceived parental criticism, and on the total score for perfectionism. Parker reported that these findings support Hamachek's (1978) belief about the existence of two types of perfectionism: normal and neurotic.

Summary of Research Methods

The existence of perfectionism in many gifted adolescents and its possible effects on their social and emotional behaviors, and the dual nature of perfectionism as normal or neurotic, are the theoretical assumptions underlying the research questions.

This study used the multiple-case research design to examine the construct of perfectionism in gifted adolescents in a rural school environment, to explore the perceptions these students have of the influences in their environment that might contribute to their perfectionism, and to investigate the consequences that they believe are the results of their perfectionism.

Instrumentation

The Goals and Work Habits Survey (Schuler, 1994), a modification of the Multidimensional Perfectionism Scale, was used to identify gifted students with perfectionistic tendencies. Six factors related to perfectionism are measured: concern over mistakes, personal standards, parental expectations, parental criticism, doubts over one's actions, and order and organization. Three cluster groups of perfectionistic types derived from the Goals and Work Habits Survey include: nonperfectionistic type, healthy or normal perfectionistic type, and the dysfunctional or neurotic type.

The Empowering Gifted Behavior Scale (Jenkins-Friedman, Bransky, & Murphy, 1986) (see Appendix B) was used to gather additional information about the participants. This instrument is used to identify patterns of enabling and disabling perfectionistic behaviors in gifted students. The mathematics, English, social studies, and science teachers of the 20 participants rated them using the Empowering Gifted Behavior Scale.

Student Sample

Participants in this study attended Brenan Middle School, located in a Mid-Atlantic state. Brenan Middle School, the only middle school in this rural district, served a population of 735, primarily Caucasian, adolescents in grades 6-8. Twenty participants were selected for the multiple-case studies during a two-phase process. In Phase I, students in grades seven and eight who had been selected to participate in accelerated math, English, and science courses in Brenan Middle School (N=112) were identified as meeting the definition of "gifted student."

During Phase II, the Goals and Work Habits Survey (Schuler, 1994) was administered to these students (N=112) to determine which students and how many met the criteria for a "perfectionistic adolescent." A "perfectionistic adolescent" was defined as one who received a moderate or high cluster score on the Goals and Work Habits Survey (Schuler, 1994).

Gifted students at Brenan Middle School who received a moderate (Cluster #2 or healthy/normal perfectionism) or higher cluster (Cluster #3 or dysfunctional/neurotic

perfectionism) score on the Goals and Work Habits Survey (Schuler, 1994) were considered eligible for participation in the study. Of the total number of students (N=112) who took the Goals and Work Habits Survey, 87.5 % (N=98) had scores in the perfectionistic clusters. Cluster #1 had 12.5% (N=14) of the students, while 58.0% (N=65) were in Cluster #2, and 29.5% (N=33) were in Cluster #3. Participants for the study were selected based on grade level, gender, and birth order. From those who had scores in the perfectionistic clusters (N=98), 20 were selected as participants in the study. There were 12 participants in Cluster #2, and 8 participants in Cluster #3.

Data Collection

Data collection occurred during two phases. In Phase I, the gifted students were identified using the criteria for accelerated courses at Brenan Middle School. Perfectionistic gifted adolescents were then identified using the Goals and Work Habits Survey (Schuler, 1994). Data were also collected from school records, informal documents, physical artifacts, and observations that illustrated the participants' abilities and perfectionistic tendencies. Anecdotes from teachers, peers, the administrator, and counselors gave additional information about the participants.

During Phase II data were collected from semistructured interviews with the participants. Demographic information about school, family, and community was gathered, as well as information about topics initiated by each participant. During each interview, the Goals and Work Habits Survey (Schuler, 1994) was also examined for more in-depth explanations. The Empowering Gifted Behavior Scale (Jenkins-Friedman, Bransky, & Murphy, 1986) was given to teachers of the participants, and interviews were conducted with a sample of teachers, counselors, and parents. Additional observations and the participant-observation activity also occurred during this phase.

Data Analysis

Two overlapping phases of data analysis on the multiple-case studies occurred. During Phase I data from the Goals and Work Habits Survey (Schuler, 1994) were analyzed to test the proposition that gifted adolescents have perfectionistic tendencies, and to determine what these perfectionistic behaviors were, based on the cluster analysis of the scores. Analysis of informal observations also took place during this phase. During Phase II, data from archival records, documentation, physical artifacts, participant observation, additional observations, and interviews were analyzed. Coding of the data began as soon as data collection started and continued throughout both phases of data analysis. Pattern coding (Miles & Huberman, 1994) occurred which revealed common themes, thereby laying the foundation for cross-case analysis.

After pattern coding, memoing or the process of writing up codes and their relationships, took place. This led to the development of propositions that reflected the findings and to the transformation of these data to integrative diagrams (Strauss, 1987) or data displays (Miles & Huberman, 1994).

Results

Phase I

Research Question 1

Do gifted adolescents in a rural middle school possess perfectionistic tendencies and, if so, what are the manifested characteristics and behaviors?

Of the 112 seventh and eighth graders who took the Goals and Work Habits Survey, 46 were males and 66 were females. More males (N=9 or 64%) than females (N=5 or 35%) were nonperfectionists (N=14), while there were more females (N=44 or 68%) than males (N=21 or 32%) in the healthy/normal perfectionistic cluster (N=65). There were similar numbers for male (N=16 or 48%) and female (N=17 or 51%) participants in the dysfunctional/neurotic cluster (N=33).

Nonperfectionists demonstrated characteristics of lower concern over mistakes, lower personal standards, lower doubts about actions, lower organization, and a lower total perfectionism scale mean score than healthy/normal perfectionists and dysfunctional perfectionists. Healthy/normal perfectionists show lower concern over mistakes, average personal standards, lower parental expectations, lower parental criticism, and average doubts about actions. Dysfunctional/neurotic perfectionists show the highest concern over mistakes, personal standards, perceived parental expectations, perceived parental criticism, and doubts about actions.

Phase II

Phase II addressed the three research questions in the study, beginning with Research Question 1 which asked: Do gifted adolescents in a rural middle school possess perfectionistic tendencies and, if so, what are the manifested characteristics and behaviors?

The healthy perfectionists generally believed that perfectionism was a part of their personality. Most of the healthy perfectionists were aware of their perfectionistic tendencies since they were young. The main theme that emerged in this study related to the need for order and organization in their lives and their quest for achieving their "personal best" since childhood.

The main theme that emerged in this study for the dysfunctional perfectionists was their fixation about making mistakes which results in their high state of anxiety. Their definitions of perfectionism focused on not making errors. Phrases such as "not messing up at all," "no mistakes," and "no screw-ups" were common. Other definitions focused on redoing work, having work done in a certain way, and correctness. Only one participant defined perfectionism as doing one's personal best. Like the healthy perfectionists, most of the dysfunctional perfectionists thought that perfectionism was part of who they were, and they each had early memories of being perfectionistic.

Research Question 2

How do male and female gifted adolescents in a rural middle school who have been identified as perfectionistic perceive their perfectionism (specific, generalized, healthy, unhealthy)?

In this study, participants were asked if perfectionism had been helpful or healthy, and harmful or unhealthy in their lives. All of the participants, except for one, stated that perfectionism had been a healthy component and helpful in their lives. Over half the healthy perfectionists mentioned that their perfectionism had helped them be more organized, work harder, and set priorities in their lives. Only four said that perfectionism was helpful in getting good grades.

All of the responses of the dysfunctional perfectionists were performance related. Perfectionism was helpful in doing better on grades or projects, doing well in sports, or having higher standards than others. In one participant's case it was a positive force with her writing, appearance, dance, and getting approval from her father.

A significant finding of this study was the perception of perfectionism as unhealthy or harmful by all of the participants. The majority of the healthy perfectionists stated that their perfectionism had been detrimental at some time during their lives. Harmful effects included: not always enjoying what was happening; time constraints; having a need for control; burn-out; and being critical of others. This drive for perfection for the healthy perfectionists was a struggle for some of them in setting priorities. Several noted the difficulty in choosing between schoolwork and spending time with friends.

Research Question 3

What do male and female gifted perfectionistic adolescents in a rural middle school perceive as influences on and the consequences of their perfectionism? In this study four influences emerged that participants perceived as influencing the manifestations and the consequences of their perfectionism. These influences were: self, school, family, and community.

As stated earlier, a majority of the participants in this study believed that perfectionism was a part of their personality. High grades were affirmations that their perfectionism was a positive personal quality. For a majority of the healthy perfectionists, however, doing their personal best was more important than the grades. Their motivation was primarily to please themselves first, then others would likewise be pleased.

For many of the dysfunctional perfectionists, however, their perfectionism led to good grades which led to approval from others they perceived had very high expectations of them. High grades then became the most salient reason for going to school for most of them, because their grades helped to define who they were.

Competition to do well in school with friends and peers was perceived as a positive influence by the healthy perfectionists, while the dysfunctional perfectionists viewed it as a form of additional pressure to perform without mistakes.

The majority of the participants stated that some of their teachers had influenced their perfectionism, either positively or negatively. Only half the healthy perfectionists said this was the case, while seven out of the eight dysfunctional perfectionists noted this influence.

The majority of the dysfunctional perfectionists felt pressure to perform perfectly from some of their teachers ever since elementary school. Comments such as "we are expected to do the best" and "the teacher's goal is for everyone to get 100" were interpreted not as a challenge to do well, but as a burden to be perfect. In turn, these participants worked very hard to please their teachers.

An interesting finding emerged about how the participants selected for interviews perceived perfectionistic tendencies in their parents and families, and the influence this had on their own perfectionism. Fifteen or 75% of the participants stated that their parents had perfectionistic tendencies, while five indicated that neither of their parents was perfectionistic.

When asked who in the community they admired, 75% of the participants indicated there was no one they could name. Of the five who did, three stated women. None of the five believed these people were either perfectionistic or had influenced their own perfectionistic attitudes or behaviors.

Consequences

The consequences of being perfectionistic affected the participants in this study in three overlapping areas—interpersonal relationships, school life, and the future.

The interpersonal relationships of the participants were affected by how their perfectionism was manifested and perceived, by themselves and others. The healthy perfectionists believed their perfectionism was primarily a positive force that motivated them to work hard. The healthy perfectionists perceived their perfectionism as helping to maintain a positive relationship with their parents, because their parents also valued working hard and mistakes were acceptable during that process.

The interpersonal relationships of the dysfunctional perfectionists, on the other hand, were more tenuous. Their relationships with their parents and families were not as stable as the healthy perfectionists, because of their intense concerns about parental expectations and criticism. They didn't want to fail because they would disappoint their parents and then be subjected to critical comments.

A significant finding in this study was the consequences participants experienced in school as a result of their perfectionistic behaviors. Two areas emerged from the interviews with all the participants. The first was the role the perfectionistic participants believed they were asked to perform in their classrooms. Because they were organized and conscientious, a majority of the participants thought that they carried the responsibility of making group work, especially cooperative learning in mixed ability groups, successful.

The second consequence that evolved during this study was the level of challenge the participants experienced throughout their school years. Sixteen or 80% of the participants stated that they really had not been challenged in school, except for their accelerated courses in middle school. They preferred accelerated courses, because they were stimulated by the content, had the opportunity to work with others who had similar abilities, and liked the faster pace. Several said the accelerated classes were still too easy for them, and several expressed the desire to have accelerated courses start in sixth grade.

A third consequence of the participants' perfectionism was their focus on the future. The future was important for the participants in this study, and high grades were a necessary component to attain their goals. All of the participants had high aspirations with plans to attend college, except for one male who was determined to be a professional basketball player. All of the participants envisioned themselves in professional careers. The dysfunctional perfectionists had future dreams that were similar to the healthy perfectionists. Career options for both groups included such professions as: lawyer,

architect, linguistic anthropologist, historian, musician, veterinarian, pediatrician, math teacher, and medical scientist.

A significant finding in this study was the participants' perceptions of gender roles in their lives. Gender expectations were not major concerns for the majority of the participants. They did not perceive parents, teachers, or community members making demands of them because of their gender. If gender expectations were made at all, it was by their peers to either perform well in sports or academics.

Conclusion

When the research began on this study, an overriding question during the participant interviews was, "What are the students saying?" Throughout the interviews the gifted adolescents shared social, emotional, interpersonal, and intrapersonal difficulties that were related to their perfectionism. It appears that many of these perfectionistic gifted adolescents are distressed by their own and others' expectations, set very high standards for themselves, and experience intense guilt and frustration when they make mistakes or fail. They are burdened with the amount of work they receive, and spend innumerable hours perfecting unchallenging tasks. Many have rarely experienced the "joy of struggle" in their classrooms, yet continue to be driven by the external reward of high grades. Their needs for intellectual challenge while learning coping, creative problem solving, and relaxation strategies emerged in this study.

Whether perfectionism is an innate drive or a learned behavior or a combination of both, its multidimensional nature was seen through the perceptions of the gifted adolescents in this study. They have clearly communicated what the manifestations of perfectionism are like for a gifted adolescent in a rural environment. It is essential that school systems, administrators, teachers, counselors, and parents listen to their voices.

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Voices of Perfectionism: Perfectionistic Gifted Adolescents in a Rural Middle School

Patricia A. Schuler

CHAPTER 1: Introduction

Recent recommendations have been made by researchers in the field of gifted education for additional research not only on the psychology and social and emotional dimensions of giftedness (Cross & Gust, 1995; Renzulli, Reid, & Gubbins, 1991; Sternberg, 1995; Swassing, 1994), but also on rural gifted students in particular (Cross & Stewart, 1995; Shore, Cornell, Robinson, & Ward, 1991; Spicker, 1993). In a review of research on rural gifted students only one study examined the psychosocial development of gifted adolescents (Cross & Stewart). Cross and Stewart stated that the influence of attending a rural school on the psychosocial development of gifted students and the impact of gender roles on gifted male and female adolescents' perceptions and behaviors have not been adequately researched.

Qualitative studies and clinical observations of gifted children and adolescents have shown perfectionism, a combination of thoughts and behaviors generally associated with excessively high standards or expectations for one's own performance (Burns, 1980; Hamachek, 1978), to be a major trait associated with giftedness (Adderholdt-Elliott, 1991; Buescher, 1985; Hollingworth, 1926; Janos & Robinson, 1985; Lovecky, 1992; Roeper, 1982). For some adolescents, being gifted can make them more vulnerable to additional stress and social problems. They may have a strong desire for social acceptance at the same time they are receiving mixed messages to either excel or subjugate their talents (Betts, 1986; Buescher, 1984; Coleman & Cross, 1988). Perfectionism can exacerbate this desire for recognition and acceptance (Buescher, 1991; Kline & Short, 1991a, 1991b). Because perfectionism intensifies in adolescence and can affect a gifted adolescent's self-image and self-esteem (Adderholdt-Elliott; Buescher; Kline & Short), educators and counselors need to understand the relationship of the emotional development of gifted male and female adolescents. The nature of rural schools also needs to be examined and understood in relation to the perfectionism of these gifted adolescents.

The problems addressed in this study were based on two theoretical propositions described below. The first concerned the concept that perfectionism, as a characteristic of many gifted adolescents, may affect their social and emotional behaviors (Hollingworth, 1926). A second related construct is that the manifestations of perfectionism can be normal or neurotic (Hamachek, 1978).

The problems addressed in this study, therefore, were twofold. First, do many gifted male and female adolescents in a rural middle school possess perfectionistic tendencies? Second, what are the characteristics and perceptions, as well as the consequences of perfectionism in gifted male and female adolescents who attend middle school in a rural environment?

Social and Emotional Aspects of Gifted Adolescents

A review of the research literature clearly indicates that gifted children and adolescents differ not only in intellectual development, but also in social and emotional

development (Colangelo & Davis, 1991; Hollingworth, 1926; Jung, 1954; Kelly & Colangelo, 1984; Piechowski, 1991). A number of research studies indicate that many gifted adolescents *think* and *feel* differently from their peers, especially as the level of intellectual giftedness increases (Cross, Coleman, & Stewart, 1995; Ford, 1989; Gross, 1993; Hollingworth, 1926; Janos, Fung, & Robinson, 1985; Loeb & Jay, 1987; Silverman, 1993). Csikszentmihalyi, Rathunde, and Whalen (1993), in a study of 200 gifted adolescents over a four year period, found that gifted adolescents possess a strong core of attributes which distinguish them from average teenagers:

> The talented are intellectually curious (Understanding) and actively receptive to information from the world around them (Sentient). At the same time, they express an unusually strong desire to excel (Achievement), are willing to persevere in order to attain their goals (Endurance), and prefer to lead others and control rather than react to events (Dominance). They possess a great desire to display their accomplishments and gain the attention of others (Exhibition) and are less prone than average teens to question their own worth (Abasement). (pp. 75-76)

At the same time gifted adolescents may possess these positive intellectual and motivational attributes, they may also exhibit certain social and emotional traits, including: emotional intensity and reactivity, heightened sensitivity, uneven development of intellectual and emotional areas, feeling different, introversion, and perfectionism (Janos & Robinson, 1985; Lovecky, 1992; Roedell, 1984; Roeper, 1982). Piechowski (1991) stated that these characteristics are all aspects of Dabrowski's (1964) theory of emotional overexcitability. Nelson (1989) and Silverman (1993) found through case studies that gifted children, adolescents, and adults possess what Dabrowski (1964) in his Theory of Emotional Development, called "superstimulatability" or "overexcitability." These strong neural excitations are manifested in five areas: psychomotor (an abundance of physical energy), sensual (heightened sharpness of the senses), imaginational (a vivid imagination), intellectual (curiosity and drive), and emotional (deep capacity to care). Gifted children and adolescents' feelings are "richer, more intense, more personal, more concerned about one's conscience, one's responsibility, and the meaning of one's life" (Piechowski, 1987, p. 22).

The social and emotional traits of gifted adolescents are found to be reflected in personality characteristics such as: insightfulness, need for mental stimulation, need to understand, excellent sense of humor, acute self-awareness, nonconformity, need for precision or logic, questioning of rules or authority, tendency toward introversion, aesthetic sensitivity, sense of justice, empathy, and perseverance. Perrone (1983) delineated six personal characteristics of gifted secondary school adolescents: divergent behavior, goal orientation, task persistence, social awareness, social effectiveness, and intraception (sensing what others want; making others laugh).

The characterization of gifted children and adolescents as basically well adjusted is supported in the research literature (Galluci, 1988; Garland & Zigler, 1993; Ludwig & Cullinan, 1984; Schneider, Clegg, Byrne, Ledingham, & Crombie, 1989; Whalen & Csikszentmihalyi, 1989). Tidwell (1980), in a psycho-educational profile of over 1,500 gifted adolescents, found that they had a higher self-concept in relation to academic ability, felt more in control of their own lives, and possessed relatively positive attitudes toward school, their teachers, and learning. The gifted adolescents did, however, minimize their achievements, and while they indicated they were "happy," they also viewed themselves as "unpopular." Tidwell (1980) hypothesized that the gifted adolescents' happiness was not dependent on the affirmations of their peers, because they had experienced enough success experiences. Likewise, Luthar, Zigler, and Goldstein (1992), in a study of 51 high achieving adolescents, found that intellectual giftedness, combined with high achievement, was associated with positive psychological adjustment. These findings support the conclusions

drawn from Olszewski-Kubilius, Kulieke, and Krasney's (1988) review of research literature that found gifted adolescents in comparison with their nongifted, same age peers, had lower levels of anxiety and tended to be more psychologically adjusted. It should be noted that the designation "moderately" gifted would accurately define most of the subjects selected for these studies.

"Exceptionally" or "profoundly" gifted children and adolescents, however, appear to experience more social and emotional vulnerabilities than their less able peers (Dauber & Benbow, 1990; Dirkes, 1983; Freeman, 1983; Gross, 1993; Hollingworth, 1926; Jung, 1954; Kline & Short, 1991a, 1991b; Lovecky, 1994; McDonald, Moore, & Freehill, 1982; Roedell, 1984; Sawyer, 1986; Winner, 1996). Powell and Haden (1984) maintained that the exceptionally gifted may have difficulty in developing a realistic ideal self, because their superior ability to create structure "may lead to the development of an overly demanding ideal self" (p. 132). A low self-esteem and a poor self-concept may be present due to the discrepancy between the ideal self aspirations and real self behavior. Inconsistent feedback about being gifted from parents and teachers may lead to ambivalence about the value of being exceptionally gifted. Baker (1993, 1995) found that exceptionally gifted and talented students also experienced clinically significant levels of loneliness, suicidal ideation, and depression in comparison with their academically gifted and academically average peers. Kaiser and Berndt (1985) noted that one in eight exceptionally gifted adolescents experienced significant loneliness, depression and anger.

In addition to stress from advanced cognitive abilities and unrealistic appraisal of one's abilities, there are other sources of stress for gifted adolescents. Peer-related stress may result from teasing from peers and pressure to conform to the school culture (Ford, 1989). Older peer contacts, early language competence, earlier onset of developmental stages, rapid progress through developmental stages, loneliness, and pressure for success or perfectionism, either self-imposed or from others, may increase stress for the gifted adolescent (Adderholdt-Elliott, 1990; Altman, 1983; Baker, 1996; Higham & Buescher, 1987; Kaiser & Berndt, 1985; Leroux, 1988).

Concern about the affective issues of gifted adolescents continues to be voiced by educators and researchers of the gifted (Gallagher, J. J., 1990). Hoge and Renzulli (1991) stated that "exceptional children often have special needs with respect to emotional health and social competence, and that systematic efforts should be made to accommodate these needs" (p. 31). Special topics include adolescents' over-critical attitude, peer relations, and parent-child relations (Hoge & Renzulli).

Gifted Adolescents

A number of researchers during the last decade have sought to explore the diverse experiences of gifted adolescents (Buescher, 1984; Csikszentmihalyi et al., 1993; VanTassel-Baska & Olszewski-Kubilius, 1989). Gifted adolescents must not only cope with the pressures of the adolescent passage, but must also deal with an additional set of developmental circumstances that go beyond normal adolescence (Buescher, 1985). As stated earlier, gifted adolescents have feelings of being *different*, which can interfere with both personal and social development (Coleman & Cross, 1988; Higham & Buescher, 1987; Jung, 1954). Buescher (1984, p. 5) used the phrase the "patchwork self" to describe young gifted adolescents and the issues they face because of their varied experiences.

Some gifted adolescents face challenges to adjustment which Blackburn and Erickson (1986, p. 552) referred to as "predictable crises." Included in these developmental

crises are: underachievement and pressure to conform; fear of success by adolescent females because of conflicting social messages; developmental immaturity, especially by gifted boys with visual motor developmental lags; multipotentiality or the overchoice dilemma; and nonsuccess or "paralyzed perfectionism" due to stronger competition and higher goals.

Several frameworks have been developed for understanding giftedness in adolescents and their particular developmental challenges or issues (Buescher, 1985; Horowitz, 1987; Mönks & Ferguson, 1983). Buescher (1987) discussed issues of giftedness that occur during adolescence that may be used to assess gifted adolescents' relative "health." These issues differ from those of their average age peers. They include:

1.	Ownership:	Who says I am gifted anyhow?
2.	Dissonance:	Recurrent tension between my performance and my own expectations.
3.	Risk-Taking:	Should I be taking new risks or seeking secure situations?
4.	Others' Expectations:	Being pushed by others' expectations, being pulled by my own needs.
5.	Impatience:	I have to know the answer right now.
6.	Identity:	What counts is who I am now. (Buescher, 1987, p. 8)

The talent that gifted adolescents possess affects the choices they make. The concomitant internal issues and stresses that arise from this talent will influence the uniqueness of their adolescent experience in comparison with their peers. For example, in their study of 200 high school gifted students in mathematics, science, athletics, music, and the arts, Csikszentmihalyi et al. (1993) discussed the many unrelated factors that influence whether or not a gifted adolescent will become a talented performer. These factors included: available knowledge and expertise within the culture; societal variables such as encouragement within the particular field; racial, ethnic, and economic class of origin; and luck or unexpected opportunities. They noted the personal qualities that contribute to an adolescent's realization of talent, especially genetic contributions to intelligence, temperament, and special skills. Gifted adolescents can contribute to the development of their talents by possessing "appropriate attentional structures, habits of concentration, and personality and motivational patterns" (Csikszentmihalyi et al., p. 38). They found that the gifted adolescents in their study first needed to have their abilities recognized by others and themselves if they were to become successful.

The conclusions drawn from the study by Csikszentmihalyi and his colleagues support Buescher's (1987, p. 58) contention that "one of the most important tasks gifted young people need to accomplish by adolescence is the building of a comfortable alliance with their talents." Timing is the key, critical element for young gifted adolescents in accepting their talent (Buescher, 1987). To face developmental challenges, gifted adolescents need to "own" their talents and high abilities in early adolescence so that they can accept some responsibility in the development of their talents. This ownership of ability helps to complete the "critical cycle of identification, recognition, opportunity, and support . . . necessary for gifted adolescents to become successful" (Buescher, 1987, p. 58). With the acknowledgment and acceptance of abilities, gifted adolescents must also examine those personality traits that may influence their choices in the development of their talents (Csikszentmihalyi et al., 1993). One of these personality traits is perfectionism.

Perfectionism

Construct of Perfectionism

The definitions of perfectionism and information about its inherent nature are diverse (Hollender, 1978; Parker & Adkins, 1995). Perfectionism has been defined as "the practice of demanding of oneself or others a higher quality of performance than is required by the situation" (English & English, 1958). The *Oxford American Dictionary* (Ehrlich, Flexner, Carruth, & Hawkins, 1980) defines a perfectionist as "a person who is satisfied with nothing less than what he thinks is perfect" (p. 663).

Hollender (1978) noted the confusion among psychotherapists between *compulsiveness* and *perfectionism*. Compulsiveness refers to "a pattern of behavior that serves to fend off unacceptable feelings or impulses, perfectionism to performance designed to evoke commendation" (p. 384). Perfectionism reaches for approval, while compulsiveness protects against disapproval (Missildine, 1963). Compulsive individuals engage in ritualistic or highly stylized behavior, while the perfectionist is goal-oriented and may carry an appropriate behavior to the extreme (Hollender, 1978; Horner, 1982). Broday (1988) stated that compulsives adhere to rules, while perfectionists tend to resist rules; compulsives are often dependable workers, whereas perfectionists are inefficient procrastinators; compulsives are emotionally restrained, whereas perfectionists tend to be hostile and negative. Broday also noted a connection between perfectionism and the passive-aggressive pattern.

Other theorists define perfectionism in various ways. Silverman (n. d.) viewed perfectionism as an abstract concept. It is a driving force, an inner knowing, and a desire to create "meaning of one's life by doing the best one is capable of doing" (p. 2). Perfectionism is an energy that can be used positively or negatively, and needs to be "channeled in positive directions rather than as a malady to be cured" (p. 1). Brodsky (as cited in Pacht, 1984) acknowledged that perfectionism is an abstract concept, but wrote, "perfection is an internalized fantasy that each of us carries with us but can carry for only so long because eventually we must face reality" (p. 390). For Burns (1980), perfectionism is mainly self-oriented, and he defined perfectionism in a unidimensional manner:

> I want to make clear what I mean by perfectionism. I do *not* mean the healthy pursuit of excellence by men and women who take genuine pleasure in striving to meet high standards. Without concern for quality, life would seem shallow and true accomplishments would be rare. The perfectionists I am talking about are those whose standards are high beyond reach or reason, people who strain compulsively and unremittingly toward impossible goals and who measure their own worth entirely in terms of productivity and accomplishment. For these people the drive to excel can only be self-defeating. (p. 34)

Several personality theorists view perfectionism as a healthy and salient part of human development (Adler, 1973; Dabrowski, 1972; Lazarfeld, 1991; Maslow, 1970). Adler regarded perfectionism as a striving to rise above feelings of dependency and helplessness. Striving for superiority included a social concern for others and a maximizing of one's abilities, as individuals developed behaviors that would enable them to gain some control over themselves and others. A sound striving for perfection was a realistic, useful attitude; a neurotic striving was a withdrawal from reality (Lazarfeld). Maslow perceived the struggle for perfection through self-actualization as the use of one's potential, capabilities, and talents; it was the absence of neurosis. Dabrowski also viewed perfectionism as a driving force that served to promote higher levels of development within the individual.

Perfectionism, according to Dabrowski, is a tool of self-development, and not a maladjustment.

A number of researchers have proposed that perfectionism be viewed from a multidimensional perspective. Bransky, Jenkins-Friedman, and Murphy (1987) discussed two types of perfectionism. They distinguished between enabling perfectionism which empowers individuals, and disabling perfectionism which cripples individuals. Hamachek (1978) described perfectionism as a manner of behaving and a manner of thinking about the behavior. Like Bransky et al., he described two types of perfectionism—normal and neurotic—and viewed them on a continuum. Normal perfectionists are those who "derive a very real sense of pleasure from the labors of a painstaking effort and *who feel free to be less precise as the situation permits"* (p. 27). Normal perfectionists possess self-acceptance with the understanding that striving can lead to satisfaction. Hamachek stated that normal perfectionism develops from either positive or negative modeling. In positive modeling, an emotionally important person actively teaches and models a lifestyle that emphasizes a preference for what is correct, better than average, and doing one's "personal best." Negative modeling occurs when someone desires to do the opposite of someone in his/her life who is constantly disorganized and doesn't follow through. Being meticulous, precise, neater, and more organized is in response to the negative model. This response helps normal perfectionists to like themselves because they know they are successfully different than the negative role model.

Neurotic perfectionists, on the other hand, "are unable to feel satisfaction because in their own eyes they *never seem to do things good enough to warrant that feeling*" (Hamachek, 1978, p. 27). There are two emotional environments in which neurotic perfectionism can develop. The first environment is one of non-approval or inconsistent approval, an environment in which an individual does not have the necessary feedback for comparing his or her actual performance with external standards. The individual doesn't know how good "good" is, leading to doubts and uncertainties. Non-approval is interpreted as a form of punishment. The second emotional environment that can promote neurotic perfectionism is conditional positive approval. In this environment, external approval is granted only when certain conditions are met; performance is over-valued, and the self is under-valued; and performance equals the self. Neurotic perfectionism is an endless cycle of trying, frustration, and failure, because the individual is always searching for approval and acceptance by setting unrealistically high standards for achievement or performance. No effort is quite good enough and the cycle continues.

Pacht (1984) disagreed with Hamachek's use of the term "normal perfectionism." He viewed perfectionism as inherently destructive and a kind of psychopathology. He agreed with Burns' (1980) definition of perfectionism as a compulsive and unrelenting strain toward impossible goals. According to Pacht and Burns, perfectionists are those who measure their self-worth in terms of accomplishment and productivity; the drive to excel is self-defeating. Berger (1974) concurred with Ellis (1962) that perfectionistic tendencies are the result of an irrational, negative self-evaluation whereby a pattern of either-or thinking is established. It is thinking in an absolutist manner: "A worthwhile person is outstanding in some way; I am not; therefore I am not worthwhile" (Berger, p. 195). This "all-or-nothing" thinking (Burns) has been described as "the saint-or-sinner syndrome" (Barrow & Moore, 1983) or "the God/scum phenomenon" (Pacht). Borcherdt (1989) stated that perfectionism is a protest against reality or a refusal to accept what exists. Weisinger and Lobsenz (1981) wrote:

> The need to be perfect places a person in a self-destructive double bind. If one fails to meet the unrealistic expectation, one has failed; but if one *does* meet it, one feels no glow of achievement for one has only done what was expected. There is no

> objective way to measure effort or improvement, no chance to relish success, no reason to build up one's self-image. (p. 237)

Barrow and Moore (1983) used the term *perfectionistic thinking* instead of perfectionism. Perfectionistic thinking is a cognitive pattern; it can be used in varying degrees at various times. *Perfectionism* describes a trait an individual possesses or not; the all-or-nothing dichotomous thinking results in goals viewed as "necessities rather than outcomes worth striving for" (as cited in Pyryt, 1994, p. 27). Barrow and Moore commented that perfectionistic tendencies may be encouraged and rewarded in the home and school during childhood, because it may result in highly regarded scholastic achievement. During adolescence, however, it may become maladaptive because of an increase in the expectations of self and others.

Many hypotheses exist about the reasons for perfectionism. Dabrowski (1964) and Silverman (1990) believed that perfectionism is inborn in some individuals, and the pressure of high standards comes from within the child. Several theorists maintain that perfectionistic children have perfectionistic parents. Rowell (1986) called this a "generation to generation psychological inheritance as opposed to genetic inheritance" (p. 8). It is perfectionistic parents trying to create the "perfect" child. Junod (as cited in Elliott & Meltsner, 1991, p. 184) referred to this type of childrearing as "the child as masterpiece." Leman (1985) and Smith (1990) contend that first born and only children have perfectionistic tendencies. For them perfectionism is their "style of life" (Adler, 1973, p. 3). In a recent study, Parker (1998) noted that gifted children are disproportionately found to be first born in their families. He also found that only children are likely to be perfectionists.

Other reasons given for perfectionism include pervasive messages from the media to be perfect and pressure from teachers and peers to be the best (Barrow & Moore, 1983). This is especially an issue for gifted children and adolescents who participate in gifted programs with perfectionistic teachers and peers. Perfectionism becomes "the norm" (Adderholdt-Elliott, 1991, p. 67). The asynchrony some gifted adolescents experience may also promote perfectionism. Developmental dysplasia (Adderholdt-Elliott, 1991) occurs when their intellectual ability is far greater than their chronological age. This discrepancy may result in some perfectionistic gifted adolescents who put undue pressure on themselves to achieve even though they may not possess the necessary skills. Elkind (1981) believed "hothousing" or giving babies intensive, early academic training could lead to perfectionistic, troubled children.

A final reason for perfectionism may be due to the influence of a dysfunctional family. Some children of alcoholics feel they have no control over their home life, and put their energies into perfecting what they can control, namely, school (Ackerman, 1989; Crespi, 1990; Smith, 1990). They put academic or work goals first because they are more tangible and rewarding than personal relationships, especially at home. Other types of dysfunctional families may also encourage perfectionistic gifted children and adolescents to become workaholics. These children and adolescents may become enmeshed in a workaholic syndrome where they have trouble saying no, lose a sense of balance in their lives, become depressed, have trouble with delegation, have a high burnout rate, and possess limited social relationships (Brophy, 1986).

Elliott and Meltsner (1991) discussed four overlapping perfectionistic categories or paths: performance, appearance, interpersonal, and moral codes. Burns (1989) likewise stated there are several kinds of perfectionism that develop from the irrational thought "I must always try to be perfect":

1. Moralistic perfectionism: "I must not forgive myself if I have fallen short of any goal or personal standard."
2. Performance perfectionism: "To be a worthwhile person, I must be a great success at everything I do."
3. Identity perfectionism: "People will never accept me as a flawed and vulnerable human being."
4. Emotional perfectionism: "I must always try to be happy. I must control my negative emotions and never feel anxious or depressed."
5. Romantic perfectionism: "I must find a perfect mate and always feel infatuated with him or her."
6. Relationship perfectionism: "People who love each other should never fight or feel angry with each other."
7. Sexual perfectionism: Men may believe "I should always have full and sustained erections. It's shameful and unmanly if I have an episode of impotence or come too quickly." Women may believe "I should always achieve orgasm or multiple orgasms."
8. Appearance perfectionism: "I look ugly because I'm slightly overweight (or have heavy thighs or a facial blemish)." (p. 121)

Hamachek (1978) delineated six specific, overlapping behaviors and attitudes associated with perfectionism that describe both normal and neurotic perfectionists. The difference lies in the duration and the intensity of these behaviors. The neurotic perfectionist experiences symptoms for longer periods and with greater intensity. These behaviors include:

1. Depression. Normal perfectionists may experience it as an unsettling feeling and work to relieve themselves of any discomfort. Neurotic perfectionists, however, feel a sense of no control over an emotional weight, using it to feel badly and to avoid work.

2. A nagging "I should" feeling that evolved from "You should" early messages. Horney (1950) coined the term to describe this feeling as the "tyranny of shoulds." Some favorite "shoulds" of perfectionists include: should not get angry, should have done it differently, should be a better person, should have known better, should have studied harder (Burns, 1980). These "should" statements in turn create a chronic fear of failure. A "failure gap," or a gap between what was achieved and what could have been achieved occurs when the perfectionist cannot tolerate less than top grades (Baldwin, 1982; Beery, 1975). This failure gap is paradoxical for the perfectionist, because it can be a high motivator to achieve, at the same time causing interpersonal relationship difficulties because of a consistently highly critical attitude toward others. Some perfectionists become paralyzed for fear of failure, leading to inertia and problems with decision making (Delisle, 1982; Riggs, 1982). If the perfectionist does fail at something, it is interpreted as a reflection of low ability, the perfectionist's greatest fear (Alvino, 1991).

3. Shame and guilt feelings. Shame is what one feels when one has failed to live up to another's expectations. Guilt is an experience of having violated an inner standard. Hamachek believed young perfectionists would experience shame more because they are still trying to satisfy the expectations of the important people in their lives. Adolescents and adults would more likely feel guilt because they have successfully internalized adult expectations. They experience a sense of guilt for letting themselves down.

4. Face-saving behavior is used by perfectionists, who feel personally incompetent, to appear capable and strong. It is a motivator to avoid publicly looking foolish and incompetent. They may "telescope" or maximize unmet goals while minimizing those that are met (Adderholdt-Elliott, 1991).

5. Shyness and procrastination. Strongly driven by the need for perfection can be tormenting, especially for a neurotic perfectionist. To avoid feeling torment, failure, and incompetence, one avoids starting. Hamachek speculated that in some instances one may also become too shy to avoid starting. Shyness and procrastination may be a way to protect one's potential so that it is not susceptible to attack. Procrastinators also have the belief system that "self worth = ability = performance" (Burka & Yuen, 1983, p. 32).

6. Self-deprecation or putting oneself down can serve several functions for the perfectionist. It can satisfy the self-fulfilling "I'm not good enough" prophecy as well as help one feel appropriately punished for not being good enough. Self-condemnation can help perfectionists feel like individuals of potential worth since they perceive themselves as missing actual worth. It is also a way to achieve a small sense of personal worth. It is a feeling of "I must be important that I am so worth condemning," or "Look how good I am—I have such high ideals that I am ashamed of myself for falling short of them" (Hamachek, 1978, p. 32).

Other behavioral traits include mood swings that occur when perfectionists tie their self-esteem to their achievement, resulting in a "roller coaster" lifestyle (Adderholdt-Elliott, 1987). Inconsistent effort and extreme fluctuation in motivation can result in binge behavior, underachievement, and overachievement (Burns, 1980). Friedman and Rosenman (1974, p. 91) referred to the "number game" some perfectionists engage in when extrinsic rewards instead of intrinsic measures are used to determine self-worth. Quantity becomes more important than quality. Finally, perfectionists tend to pine over the past, because they have difficulty forgetting past mistakes instead of focusing on the future (Elliott & Meltsner, 1991; Freeman & DeWolf, 1989).

Perfectionism has been related to a variety of psychological maladjustments including: depression, eating disorders, writer's block, migraines, sexual dysfunction, obsessive compulsive personality disorders, dysmorphophobia, suicide, and Type A coronary-prone behavior (Pacht, 1984). Perfectionism has also been connected with underachievement, academic procrastination, and career obstacles and failure (Baum, Renzulli, & Hébert, 1995; Clasen & Clasen, 1995; Ferrari, 1992a, 1992b; Whitmore, 1980). However, one cannot conclude that perfectionism causes these conditions or that it is necessarily destructive. Hamachek (1978) viewed these types of linkages as consequences of neurotic perfectionism, while normal perfectionism is linked to healthy consequences. Likewise, Whitmore believed in the potential for perfectionism to be a positive force for achievement or a negative force for underachievement.

Silverman (n.d.) noted that while perfectionism can be situation specific in areas that are important to the individual, the value placed on perfectionism is culturally determined. Society values technological, cultural, artistic, and athletic advances at the same time we "denigrate gifted people and the personality trait responsible for their willingness to invest incredible amounts of time and energy in their passions" (p. 1). Perfectionism in competitive fields such as gymnastics, figure skating, or swimming is applauded, while perfectionism in school work is discouraged. Silverman stated an individual's motivation,

personality type, and cultural values need to be considered when discussing the paths of their perfectionism. For example, introverts who represent half of the gifted population (S. A. Gallagher, 1990) tend to be strong perfectionists (Dauber & Benbow, 1990).

Measurement of Perfectionism

Just as definitions and dimensions of perfectionism have been varied, so too has its measurement. Adderholdt-Elliott (1991) noted that, "Observing and describing perfectionism is easier than measuring it" (p. 65). Throughout the 1980s, the Burns Perfectionism Scale (1980) was widely used, but it is limited by its unidimensional focus on personal standards and concern over mistakes. Hewitt and Flett (1989) developed the Multidimensional Perfectionism Scale that emphasizes the interpersonal aspects of perfectionism. This instrument produces three scores for self-oriented, other-oriented, and socially prescribed perfectionism:

> Self-oriented perfectionism is an intrapersonal dimension characterized by a strong motivation to be perfect, setting and striving for unrealistic self-standards, focusing on flaws, and generalization of self-standards. Self-oriented perfectionism may also involve a well-articulated ideal self-schema . . . . Other-oriented perfectionism involves similar behaviors, but these behaviors are directed toward others instead of toward self. Finally, socially prescribed perfectionism entails the belief that others have perfectionistic expectations and motives for oneself. (p. 98)

Frost, Marten, Lahart, and Rosenblate (1990) developed a perfectionism questionnaire, also called the Multidimensional Perfectionism Scale. This scale examines the intrapersonal nature of perfectionism based on Hamachek's (1978) construct of perfectionism. The major dimensions of this measure include: concern over making mistakes, high personal standards, the perception of high parental criticism, the doubting of the quality of one's actions, the perception of high parental expectations, and a high preference for order and organization (Frost et al., p. 449). The results of two recent studies (Parker & Stumpf, 1995; Schuler & Siegle, 1994) support the use of the Multidimensional Perfectionism Scale to measure perfectionism in academically talented children and adolescents.

Parker (1997) conducted a cluster analysis on the Multidimensional Perfectionism Scale (Frost et al., 1990) that resulted in three groups: a nonperfectionistic type, a healthy or normal perfectionistic type, and a dysfunctional or neurotic perfectionistic type. The *nonperfectionist* type was characterized on the MPS by low organization, low personal standards, low perceived parental expectations, and a low total perfectionism score. The *healthy* perfectionist was characterized by low concern about making mistakes, low doubts about actions, low levels of perceived parental criticism, highest amount of organization, and a moderate total perfectionism score. The *dysfunctional* or *neurotic* perfectionist type had the highest scores on concern over mistakes, personal standards, parental expectations, doubts about actions, perceived parental criticism, and the highest total score for perfectionism. Parker reports these findings support Hamachek's (1978) belief in the existence of two types of perfectionism: normal and neurotic.

Perfectionism and Gifted Adolescents

Qualitative studies and clinical observations of gifted children and adolescents have shown perfectionism to be a trait associated with giftedness (Adderholdt, 1984; Ford, 1989; Hollingworth, 1926; Karnes & Oehler-Stinnett, 1986; Lovecky, 1994; Roeper, 1982; Silverman, 1990; Whitmore, 1980). For example, the participants in Terman's longitudinal

study of gifted children were found to have higher expectations and perfectionistic tendencies (Oden, 1968).

Perfectionism has been viewed by educators and clinicians as a negative trait and may have psychopathological implications for gifted children and adolescents (Adderholdt-Elliott, 1987; Hollingworth, 1926; Kerr, 1991). Perfectionism has repeatedly been stated as a major counseling issue for gifted children and adolescents (Kerr, 1991; Silverman, 1993; Webb, Meckstroth, & Tolan, 1982), especially when addressing underachievement and emotional turmoil issues (Pyryt, 1994).

Case studies and anecdotal records have been the main source of data on perfectionism in children, while empirical studies have focused primarily on gifted adults and gifted college students (Adderholdt, 1984; Adkins, 1994; Brown, 1993; Frost, Marten, Lahart, & Rosenblate, 1990; Hewitt & Flett, 1993; Mosher, 1995). Few empirical studies, however, have been done on gifted children and adolescents who are perfectionistic (Adkins; Bellamy, 1993; Bransky, 1989; Orange, 1997; Parker & Mills, 1996; Parker & Stumpf, 1995). Bransky found that perfectionistic junior high students in her study saw themselves as the principle agents of their academic outcomes and took more responsibility for their academic outcomes. She also found that students with high academic perfectionism may also experience an "extraordinary need to excel in other areas of their lives other than academics" (Bransky, p. 100). Baker (1996), as part of her study on stressors of academically gifted adolescents, included a perfectionism subscale on a psychosocial stressors measure. Exceptional girls in ninth grade reported statistically significant higher levels of perfectionism than average ability girls on this scale. Orange found that 89% of a high school sample of gifted students displayed perfectionistic tendencies. Roberts and Lovett (1994) also discovered statistically significant higher levels of perfectionism among gifted adolescents in grades 7-9 than academic achievers and nongifted students. In a recent study (Schuler & Siegle, 1994), perfectionistic tendencies were found in all socioeconomic and racial/ethnic groups for gifted students in grades six, seven, and eight.

Rural Education and Gifted Adolescents

A major concern for rural communities continues to be the exodus of bright young adults because of the limited availability of professional and managerial jobs (Birnbaum, 1978; Spicker, 1992a; Stern, 1992). Cobb, McIntire, and Pratt (1989) found that rural youth often see themselves more often in low-level, less skilled jobs than their urban and suburban peers. Young adults who have roots in their community for generations choose not to remain or to return not only because of the decline in opportunities, but also because of poor health care and underfunded schools (Spicker, 1992b). To seek "greener pastures" many bright adolescents must break ties with their rural communities if they are to find more educational opportunities, better paying jobs, and careers (Seal & Harmon, 1995).

Another problem for rural gifted and talented students is the lack of services for meeting their special educational and psychosocial needs (Newland, 1976; Yoder, 1985). According to Spicker, Southern and Davis (1987), there are five major obstacles in providing for the special needs of rural gifted and talented children and adolescents: (a) acceptance of the status quo and resistance to change by the community, making it hard to initiate new programs, (b) lower funding levels especially for programs for a small number of students, (c) small, less specialized teaching staffs, (d) fewer counselors, school psychologists, and curriculum specialists to assist in providing educational and counseling services, and (e) a self-sufficient attitude, making it less likely administrators and educators will seek outside assistance from experts on gifted education.

Research on gifted and talented children and adolescents has recently focused on the special needs of those who live in very diverse rural areas. Research on the experiences and education of gifted children and adolescents in rural areas was promoted in 1988 through the Jacob K. Javits Gifted and Talented Students Education Act, which was authorized under Title IV, Part B of the Hawkins-Stafford Elementary and Secondary Amendments of 1988. Several projects specifically targeted rural gifted children and adolescents (Barnes & Price, 1994). Project SPRING II (Special Populations Rural Information Center for the Gifted) was a three-state Rural Consortium, designed to help identify and provide services for rural gifted children from ethnically diverse, economically disadvantaged backgrounds in Indiana, New Mexico, and South Carolina. Project ARTS (Arts for Rural Teachers and Students) also targeted underserved rural gifted and talented students in Indiana, South Carolina, and New Mexico through visual and performing arts programs. The goal of Project SEARCH (Selection, Enrichment, and Acceleration of Rural Children) was to increase the number of disadvantaged rural students, kindergarten through grade two in South Carolina, in gifted and talented programs. These projects did not address the social and emotional issues of gifted adolescents, but instead focused on identification, teacher training, modifying curriculum models and materials, and parental involvement.

Gifted adolescents' emotional development as well as their morale, social relationships, motivation, and sense of self-worth is affected by the support or neglect of their cognitive needs (Betts, 1986; Kline & Short, 1991a, 1991b; Roedell, 1984; Whitmore, 1980). Tannenbaum (1983) stated that "a climate of social acceptance has to be created at school and in the community so that the gifted will want to realize their potential rather than suppress their exceptionalities" (p. 419).

Mönks and Ferguson (1983) noted that a "gifted (or any) child's development is affected jointly by historical and sociocultural givens; by facilitory and inhibitory interactions in the social settings of the family, peer group, and school/work; and by gifted individuals themselves" (p. 16). The interactions between these settings and basic changes in biological states, cognitive abilities and social position cause transformations in the gifted adolescent's attachments, sexuality, and friendship, as well as achievement, identity and autonomy.

Little is known about the experiences of gifted students in rural schools. Research on the social and emotional issues of gifted students in our nation's schools has focused primarily on the effects of being labeled gifted, social problems, and stress (Betts, 1986; Hershey & Oliver, 1988; Levine & Tucker, 1986; Myers & Pace, 1986). Many of these studies have drawn from urban and suburban areas or from highly specialized groups of students (e.g., summer residential programs for gifted students). Only in the past two decades have rural gifted students been recognized as a distinct subpopulation of gifted students (Kearney, 1991a, 1991b; McIntire, 1994; Newland, 1976). Most of this literature, however, addresses program and curricular opportunities to meet their educational needs (Benbow, Argo, & Glass, 1992; Guzik, 1994; Jones & Southern, 1992; O'Connell & Hagans, 1985; Pitts, 1986; Spicker, 1992a; Swanson, Elam, & Peterson, 1993).

Cross and Stewart (1995) stated the influence of attending a rural school on the psychosocial development of gifted students has not been adequately researched. In a phenomenological investigation they examined the lifeworld (lebenswelt) of gifted male and gifted female adolescents ($N = 24$) from rural high schools who were attending an annual summer residential program for gifted students. They reported that stress among these gifted high school adolescents comes from the absence of academic options available within a school environment that encourages global participation in most activities. While rural gifted students take advantage of cultural opportunities to a greater degree than their suburban peers (McIntire, 1994), it can become stressful for the gifted adolescent to take the

risk of not participating when it is expected. Stress related to academic concerns, such as limited advanced courses, grades or getting into certain colleges, and worrying about being successful, was also found in rural gifted adolescents by Cross and Stewart.

Kearney (1991a) stated that the exceptionally gifted in rural areas also face special issues, including problems of finding intellectual peers, appropriate educational interventions, and support networks. Exceptionally gifted females in rural areas also may face rigidly defined gender roles and may have to choose between a more traditional rural lifestyle or leave for more advanced education (Kearney, 1991b). Whatever the sources of stress for gifted adolescents in rural environments, especially those who are exceptionally gifted, the price of talent, intensity, perfectionism, and extreme sensitivity can be high.

Rural Middle Schools and Gifted Adolescents

Middle schools were developed during the 1960s as a model for the education of young adolescents in reaction to dissatisfaction with the inability of junior high schools to meet the special needs of students, the inflexibility of scheduling, and the lack of teachers specifically trained to work with young adolescents (Carnegie Council on Adolescent Development, 1989). This unique phase in a young adolescent's life was recognized in terms of what "transitional schools" (Eichorn, 1980) should offer them to address their unique issues. These include: development of a personal and social identity, changes in physical and health needs due to changes relating to puberty, questioning of authority, dealing with adults in different roles, media and peer pressure, and new situations of conflict resolution (Beane, 1990).

The Carnegie Council on Adolescent Development (1989) offered eight recommendations as the foundation for the middle school concept: (a) creation of small learning communities of teachers and students; (b) development of a core academic program; (c) student success through the elimination of tracking and the implementation of cooperative learning; (d) empowerment of teachers and administrators to make decisions about students, curriculum and the school; (e) staffing middle schools with specially trained teachers; (f) emphasis of health and physical well-being; (g) involvement of families in the educational program; and (h) involvement with the community and community involvement with the schools. Other common elements include: a program for exploratory and enrichment experiences; the use of instructional methods appropriate to the age group; flexibility in scheduling and student grouping; interdisciplinary or multidisciplinary studies; cooperative planning and team teaching; emphasis on increasing the student's independence, responsibility, and self-discipline; and opportunities for students to formulate personal values and standards (Johnston & Williamson, 1991). Recommendations for middle schools to meet issues faced by gifted adolescents in middle schools were not addressed in this report.

The Council of State Directors of Programs for the Gifted (n. d.) did examine these issues, and offered the following suggestions for the middle-level education of gifted learners: (a) use flexible pacing of instruction to accommodate different students' learning rates; (b) use flexible grouping for specific learning purposes; (c) provide advisor/advisee groupings for gifted learners to supplement, but not replace, mixed advisor/advisee groupings; and (d) provide ample and varied opportunities for in-depth learning based on students' interests.

Middle school education and the education of young gifted adolescents would appear to share some common goals and beliefs. Sicola (1990) and Tomlinson (1994a) noted, however, that conflicting issues have arisen between the two movements. Erb (1992) acknowledged that the debate between middle school education and gifted education exists

because many middle schools are not delivering differentiated curriculum and instruction for diverse learners. According to Tomlinson (1992), the major difficulty in providing services for the gifted in middle schools, no matter where the geographic location, is

> . . . the tendency to generalize what may be an effective middle school education for many preadolescents to all preadolescents. This is troubling for gifted learners and is made more troubling by a general silence regarding their needs, sometimes broken with either a denial of those needs or irritation at their presence. Meeting the educational needs of these students is complex and unlikely to happen without specific intent and planning. Both the intent and planning appear largely absent in the middle school literature. (p. 232)

Coleman and Gallagher (1995) stated that middle schools and gifted education can be blended together if those who plan and implement programs pay careful attention to the needs of gifted students. A study examining best practices that blended gifted programs in middle schools was conducted in five urban, suburban, and rural school districts (Coleman, Gallagher, & Howard, 1993). In the one rural school investigated, many of Tomlinson's (1992) concerns were addressed through careful planning and extensive staff development. Services for the gifted adolescents in this rural middle school included advanced classes and in-depth explorations. The affective needs of all the students were considered a top priority, although specific means to address the gifted adolescents' issues were not mentioned.

In terms of their social and emotional issues, Sicola (1990) stated that gifted adolescents are at risk for affective problems because of a decreased emphasis on an academic focus at the middle school level and the increased emphasis on heterogeneity. Feelings of isolation, poor social skills, discrimination by age peers, and social frustration can affect gifted adolescents who are separated from their intellectual peers (Davis & Rimm, 1985). Sicola argued that it is appropriate for middle schools to group gifted adolescents together in their strength areas, since the goal of the middle school is to meet the affective needs of all students.

Research studies examining the social and emotional issues of gifted students in middle schools is limited. In one study, Elmore and Zenus (1994) found gifted sixth grade adolescents ($N = 36$) in a suburban area benefited academically, socially, and emotionally when they were assigned to accelerated mathematics sections using cooperative learning strategies to foster social-emotional development. In another study, Fox and Katzel (1991), examined gifted students' ($N = 128$) attitudes of their fellow middle school students in a suburban school district. Students in an accelerated science class perceived themselves as academically strong, with females having a strong sense of competence. These gifted adolescents also rated themselves as having a more positive attitude about themselves than did their age peers in regular science classes. Gifted adolescent girls, however, may still feel peer pressure to conform. Callahan, Cunningham, and Plucker (1994), using a qualitative method of inquiry, reported that gifted female adolescents in grades six, seven, and eight demonstrated a desire to conform and that self-doubt was an obstacle to future success.

CHAPTER 2: Procedures

This study used the multiple-case research design to address the research questions. The multiple-case study was selected because it can be used to "challenge theoretical assumptions held prior to the data gathering" (Merriam, 1988, p. 28). The existence of perfectionism in many gifted adolescents and its possible effects on their social and emotional behaviors, and the dual nature of perfectionism as normal or neurotic, are the theoretical assumptions underlying the research questions.

The purpose of this multiple-case study was threefold: to examine the construct of perfectionism in gifted adolescents in a rural school environment, to explore the perceptions these students have of the influences in their environment that might contribute to their perfectionism, and to investigate the consequences that they believe are the results of their perfectionism. The following questions guided the study:

1. Do gifted adolescents in a rural middle school possess perfectionistic tendencies and, if so, what are the manifested characteristics and behaviors?
2. How do male and female gifted adolescents in a rural middle school who have been identified as perfectionistic perceive their perfectionism (specific, generalized, healthy, unhealthy)?
3. What do male and female gifted perfectionistic adolescents in a rural middle school perceive as influences on, and the consequences of, their perfectionism?

Definition of Terms

The following definitions were used in this study:

Gifted Adolescent—A student who showed superior development in a given domain was considered to be a gifted adolescent. Mathematics (grades 7, 8), Language Arts (grade 8), and Science (grade 8) were the domains selected for this study.

Perfectionism—A combination of thoughts and behaviors associated with excessively high standards or expectations for one's own performance was the definition used for perfectionism. Perfectionism may be considered normal/healthy or neurotic/dysfunctional (Hamachek, 1978).

Rural Area—Areas outside of U.S. Metropolitan Statistical Areas (MSAs) having fewer than 10,000 inhabitants (U. S. Bureau of the Census, 1991) were considered rural.

Middle School—An educational setting for adolescents with the configuration of grades 6, 7, and 8 where the following recommendations are emphasized: small communities for learning within the larger school buildings; a core academic program for all learners, success experiences for all students; empowerment of teachers and administrators in making decisions about the middle grades students; teachers who are expert at teaching young adolescents; improved academic performance fostered through health and fitness; families reengaged in the education of young adolescents; and schools that are reconnected with their communities (George, Stevenson, Thomason, & Beane, 1992).

Preppie—A student designation for any seventh or eighth grader who belonged to the school subculture group that focused on earning high grades. The "Preppies" demonstrated hard work and a tendency to do their best in everything they attempted.

Instrumentation

The Goals and Work Habits Survey (Schuler, 1994) (see Appendix A), a modification of the Multidimensional Perfectionism Scale, was used to identify gifted students with perfectionistic tendencies. Six factors related to perfectionism are measured: concern over mistakes, personal standards, parental expectations, parental criticism, doubts over one's actions, and order and organization. Order and Organization is not included in the total score on the Multidimensional Perfectionism Scale, because Frost et al. (1990) found that it was not a core component of perfectionism. Three cluster groups of perfectionistic types derived from the Goals and Work Habits Survey include: nonperfectionistic type, healthy or normal perfectionistic type, and the dysfunctional or neurotic type.

The Empowering Gifted Behavior Scale (Jenkins-Friedman, Bransky, & Murphy, 1986) (see Appendix B) was used to gather additional information about the participants. This instrument is used to identify patterns of enabling and disabling perfectionistic behaviors in gifted students. The mathematics, English, social studies, and science teachers of the 20 participants rated them using the Empowering Gifted Behavior Scale (Jenkins-Friedman, et al.).

Student Sample

Participants in this study attended Brenan Middle School, located in a Mid-Atlantic state. Brenan Middle School, the only middle school in this rural district, served a population of 735, primarily Caucasian, adolescents in grades 6-8. Twenty participants were selected for the multiple-case studies during a two-phase process. In Phase I, students in grades seven and eight who had been selected to participate in accelerated math, English, and science courses in Brenan Middle School ($N = 112$) were identified as meeting the definition of "gifted student."

During Phase II, the Goals and Work Habits Survey (Schuler, 1994) was administered to these students ($N = 112$) to determine which students and how many met the criteria for a "perfectionistic adolescent." A "perfectionistic adolescent" was defined as one who received a moderate or high cluster score on the Goals and Work Habits Survey. Scores on the Goals and Work Habits Survey were on a continuum with scores that ranged from 44-82 for Cluster #1, 41-94 for Cluster #2, and 76-135 for Cluster #3, with a mean of 76.62.

Gifted students at Brenan Middle School who received a moderate (Cluster #2 or healthy/normal perfectionism) or higher cluster (Cluster #3 or dysfunctional/neurotic perfectionism) score on the Goals and Work Habits Survey (Schuler, 1994) were considered eligible for participation in the study. Of the total number of students ($N = 112$) who took the Goals and Work Habits Survey, 87.5 % ($N = 98$) had scores in the perfectionistic clusters. Cluster #1 had 12.5% ($N = 14$) of the students, while 58.0% ($N = 65$) were in Cluster #2, and 29.5% ($N = 33$) were in Cluster #3. Participants for the study were selected based on grade level, gender, and birth order. From those who had scores in the

perfectionistic clusters ($N = 98$), 20 were selected as participants in the study. There were 12 participants in Cluster #2, and 8 participants in Cluster #3.

Demographic information about the participants in Cluster #2 (healthy/normal perfectionism) is presented in Table 1, while that of Cluster #3 (dysfunctional/neurotic perfectionism) participants is shown in Table 2.

Table 1

Demographics of Cluster #2 Participants (Healthy/Normal Perfectionism) for Sex, Race, Age, Grade, Siblings, Birth Order, Parents' Educational Level, and Parents' Occupation ($N = 12$)

Name	Sex	Race	Age	Grade	Siblings	Birth Order	Parents' Education Level	Parents' Occupation
Barbara	F	White	13	7	1 younger	oldest	M-College F-College	Educator Economic Developer
Gretchen	F	White	13	7	1 older	youngest	M-College F-College	Educator Economic Developer
Kate	F	Asian	13	7	1 younger	oldest, adopted	M-College F-College	Educator Engineer
Stephanie	F	White	13	7	3 older	youngest	M-College F-High School	Chemist Builder
Jim	M	White	13	7	2 older	youngest	M-College F-Some College	Insurance Agent Landscaper
Rachel	F	White	13	7	2 older 1 younger	middle	M-College F-High School	Chemist Builder
Kieran	M	White	13	8	1 younger	oldest	M-High School F-College	Secretary Athletic Director
Tracey	F	Asian	13	7	1 older	youngest	M-College F-College	Deceased Contractor
Scott	M	White	12	7	2 younger	oldest	M-College F-College	Homemaker Athletic Director
Bob	M	White	13	8	1 older	youngest	M-2yrs. College F-College	Assistant Veterinarian Sales Engineer
Caitlin	F	White	13	8	1 younger	oldest	M-College F-College	Postal Worker Unemployed
Andy	M	White	13	7	3 older	youngest	M-High School F-2 yrs. College	Nurse Postal Worker

Note. Barbara and Gretchen are identical twins, as are Stephanie and Rachel.
In column entitled Parents' Education Level, M denotes mother, F denotes father.

Table 2

Demographics of Cluster #3 Participants (Dysfunctional/Neurotic Perfectionism) for Sex, Race, Age, Grade, Siblings, Birth Order, Parents' Educational Level, and Parents' Occupation ($N = 8$)

Name	Sex	Race	Age	Grade	Siblings	Birth Order	Parents' Education Level	Parents' Occupation
Phoebe	F	White	13	7	1 older 1 younger	middle	M-College F-College	Educator Lab Technician
John	M	White	14	8	0	only child	M-High School F-High School	Exec. Assistant Salesperson
Eric	M	White	14	7	2 younger	oldest	M-College F-College	Secretary Salesperson
Emily	F	White	14	8	2 younger	oldest	M-College F-College	Educator Lab Technician
Devon	M	White	13	7	1 younger	oldest	M-High School F-College	Homemaker Systems Analyst
Fred	M	White	13	7	2 younger	oldest	M-High School F-High School	Salesperson Firefighter
Mary	F	White	13	7	2 younger	oldest	M-College F-High School	Homemaker Salesperson
Annie	F	Asian	13	7	2 younger	oldest, adopted	M-College F-College	Nurse Captain

Note. Phoebe and Emily are siblings.
In column entitled Parents' Education Level, M denotes mother, F denotes father.

Data Collection

Data collection occurred during two phases. In Phase I, the gifted students were identified using the criteria for accelerated courses at Brenan Middle School. Perfectionistic gifted adolescents were then identified using the Goals and Work Habits Survey (Schuler, 1994). Data were also collected from school records, informal documents, physical artifacts, and observations that illustrated the participants' abilities and perfectionistic tendencies. Anecdotes from teachers, peers, the administrator, and counselors gave additional information about the participants.

During Phase II data were collected from semistructured interviews with the participants. Demographic information about school, family, and community was gathered, as well as information about topics initiated by each participant. During each interview, the Goals and Work Habits Survey (Schuler, 1994) was also examined for more in-depth explanations. The Empowering Gifted Behavior Scale (Jenkins-Friedman, Bransky, & Murphy, 1986) was given to teachers of the participants, and interviews were conducted with a sample of teachers, counselors, and parents. Additional observations and the participant-observation activity also occurred during this phase.

Both quantitative and qualitative data were obtained during the two phases of data collection. Quantitative data about attitudes and behaviors concerning perfectionism were gathered from the Goals and Work Habits Survey (Schuler, 1994), while the semistructured interviews, including further examination of the survey, and documentary evidence resulted in gathering qualitative data.

Data Analysis

The theoretical orientation based on the propositions that many gifted adolescents exhibit perfectionistic tendencies, and that this perfectionism can be normal or neurotic, guided the multiple-case studies analysis. Explanation-building was the mode of analysis used for this study, because the goal was to test or confirm the propositions and create ideas for further research. The result of this explanation-building process was the development of a cross-case analysis which can enhance generalization and deepen explanation (Miles & Huberman, 1994). The results of the cluster analysis of scores from the Goals and Work Habits Survey (Schuler, 1994) resulted in *types* or *families* of clusters. These included the nonperfectionistic cluster, the healthy/normal cluster, or the dysfunctional/neurotic cluster. Participants in the latter two clusters were the subjects of this study.

Two overlapping phases of data analysis on the multiple-case studies occurred. During Phase I data from the Goals and Work Habits Survey (Schuler, 1994) were analyzed to test the proposition that gifted adolescents have perfectionistic tendencies, and to determine what these perfectionistic behaviors were, based on the cluster analysis of the scores. Analysis of informal observations also took place during this phase. During Phase II, data from archival records, documentation, physical artifacts, participant observation, additional observations, and interviews were analyzed. Coding of the data began as soon as data collection started and continued throughout both phases of data analysis. Pattern coding (Miles & Huberman, 1994) occurred which revealed common themes, thereby laying the foundation for cross-case analysis.

After pattern coding, memoing or the process of writing up codes and their relationships, took place. This led to the development of propositions which reflected the findings and to the transformation of these data to integrative diagrams (Strauss, 1987) or data displays (Miles & Huberman, 1994).

CHAPTER 3: Results

Sample Case Studies

Hamachek (1978) described perfectionism as a manner of behaving and a manner of thinking about the behavior, and described two types of perfectionism—normal and neurotic. Normal or healthy perfectionists are those who feel a sense of pleasure from their labors, but also are willing to accept less precision in their work, depending on the situation. Neurotic or dysfunctional perfectionists, on the other hand, do not feel satisfaction with their effort because it never seems good enough.

All of the participants in this study had high personal standards and high degrees of conscientiousness. The factors that influenced the manifestations of these standards were different for each cluster. Order and organization, support systems, and personal effort were those that impacted the healthy perfectionists, while concern over mistakes, perceived parental expectations, and perceived criticisms were the salient factors for the dysfunctional perfectionists.

Healthy/Normal Perfectionists

Jim

Watching Jim walk the hallways at Brenan Middle School, one would think that he had taken the wrong bus to school. His freckled, lightly tanned "baby face" and short stature made him appear much younger than most of the seventh graders. His snappy attire of black, over-sized T-shirt, black shorts, black sneakers, and black knapsack reminded one of Zorro about to conquer the world. And Jim was—the sports world. For sports was the sphere in which Jim wanted to be perfect. The "Just Do It" emblazoned across his chest could have been his personal motto.

Jim's easy-going and gregarious personality was immediately apparent. His ready smile lit up his twinkly blue eyes that were framed by his crisp buzz-haircut. His raspy voice, however, was incongruous with his appearance. His politeness and confidence about himself indicated a far older adolescent. Jim considered himself a "good kid," and his teachers noted he was happy, energetic, inquisitive, and confident since elementary school. His first grade teacher stated,

> Jim has done so well this year. He is cooperative, reliable, conscientious, and funny! What more could a teacher ask for?

From being a "delightful boy" in kindergarten to being enthusiastic with a perpetual smile in fourth grade, Jim's motivation to do well was apparent in middle school. He continued to be an outstanding student academically, especially in math and science. Always prepared with neatly done work, Jim exuded boundless enthusiasm. One teacher wrote on his report card, "Wow! Look out . . . lots of energy at work here!" That was Jim—a dynamo.

Jim's world revolved around sports. From the time he was a little boy, he had a passion for them. His older brothers were his role models, especially his 15 year old brother who was in high school. Like Jim, he was small, athletic, and had the same attitude. Jim acknowledged that his perfectionism, which he defined as making no mistakes, was focused primarily in sports and being organized. When asked to give an example of something that he considered very perfectionistic, Jim responded,

> Like when I play sports and everything, I'm like usually, I'm good. Because I have two older brothers, like my whole family's all athletic and everything. So I like to have things done right, and when people, like, do things totally wrong . . . kind of gets me mad, but I usually just help them.

Jim competed with his brother, both on and off the playing fields, especially in school accomplishments. Perfectionism was regarded as positive by Jim, for it helped him to do better and work harder.

Jim could see no harmful effects of being perfectionistic. The annoyance he felt when others weren't doing things perfectly, especially in sports, was overcome by his strong need to help them. He enjoyed getting and giving positive criticism:

> Like if they're having a problem and the coach really doesn't know it or something, I really just help them. I, like, I almost have to help them. Like, I have to help them. Like tell them what they are doing wrong and stuff. Otherwise I would just, like . . . wouldn't be able to stand it.

Although Jim considered himself a perfectionist in sports and had a strong desire for organization and neatness, he did not view anyone else in his family as perfectionistic. Only he wanted everything organized and neat, especially his room and his extensive CD collection.

Jim's parents had high standards for him, but he viewed this positively because they encouraged him to do his "personal best." Jim enjoyed the "playful" atmosphere in his home, and felt really close to his father. The relationship with his mother was also very positive. It was his mother who said, "Learn from your mistakes" when he felt frustrated. If he thought he "should" be able to do something and was struggling, he would try to follow her advice.

Jim derived most of his satisfaction from sports and school. He thought the challenge of school work was "just right" for him, but had strong thoughts about wanting to be in similar ability classes. While he enjoyed working with students of different ability levels, he wanted to be in smaller groups of kids like himself who could learn more complex things, ask more questions, and work faster. He thought this was important especially for math, science, English, and social studies.

Jim thought he got along well with most of the kids at school. Teasing about his height didn't bother him, because he had heard it "a million times." Being short was okay; it was doing your best that was important. He had both boy and girl friends, and didn't think his perfectionism had influenced his relationships with them. He worked to please himself first and then sometimes his family and friends.

When asked about the future, Jim's response contained a sense of sadness and yet a realistic view of his abilities:

> I'll probably be a businessman, even though I don't want to, but I'll probably end up doing that . . . . I'd almost want to be in sports and everything, but that's going to be hard . . . . Well, because I'm, like, so small. I'm not, like, awesome like the pros and stuff.

Jim wanted to be perfect in sports, fantasized about a career in professional sports, yet realized his strengths and limitations. He viewed himself as successful in sports, in school,

and at home. Jim was content with his passion for sports and his high abilities and success in school:

> I'm usually happy. It's like how I've always grown up. My whole house is always, usually, happy and everything.

It was the support of his family, the role model of his brothers, and the expectations to do his personal best that provided an anchor for Jim.

Kieran

Kieran was the all-around model student at Brenan Middle School: Student of the Month, member of the Jazz Ensemble, good citizen, leader, popular with peers and faculty. Seven graduation awards, the most for any eighth grader, were testaments to his high abilities, commitment, and intense interests throughout his middle school years.

It was hard not be impressed with Kieran. His mature, polite mannerisms were endearing to everyone. Big brown eyes on a freckled, tan face sparkled easily when he spoke. His dark auburn hair was meticulously styled and seemed quite congruent with his impeccable "preppie" look—crisply creased, tan shorts; striped olive green, navy blue, and white Henley shirt, and new black Nike sneakers. It was Kieran's smile, though, that people noticed. It was electric. In an instant, the serious, intense eighth grader's face would be transformed into a huge grin bounded by enormous dimples. His braces added to his impish appearance.

Kieran was also a perfectionist . . . in his words, "Big time." He stated that his perfectionism was just part of who he was, and that he had always been that way. His earliest memory of being perfectionistic occurred when he was five or six. He would get muddy, go take a bath, and then go back to play—on his own initiative. Kieran hated to be dirty; he felt compelled to be neat and organized. His teacher in first grade noted, after a parent-teacher conference, that his mother says

> Kieran is very happy in first grade. She realizes that he is a perfectionist and that he gets upset if he makes any mistakes.

This desire to do well was stated by his teachers throughout elementary and middle school. His high quality work was always neatly and carefully done. Straight As and A+s on his report cards indicated his high abilities and consistent effort to do well. From the time he was in second grade, teachers tried to find ways to enrich his classwork, because of his outstanding work and "fine attitude and effort." Kieran was a "joy" and a "pleasure" to teach.

Kieran loved school, not only because of his friends, but also because he loved to learn. Friends, school, and tennis gave him the most satisfaction. He loved to be challenged. Unfortunately, he only felt challenged by the accelerated courses in middle school. The work, for the most part, was too easy, there was too much to do, and that took the fun away from learning. It was still important for him to do well, however, because of his high personal standards and because of the future. In the year 2016 he envisioned himself an architect, married with two kids, and playing in a tennis league. School was the means to this end.

Kieran had never experienced a major disappointment until the fall of eighth grade. Even though he was always an A student, earning a B was scary to him. His greatest fear

was failing, and when he did receive a B in an accelerated English class, he was disconcerted. His teacher wrote

> Kieran received a B in this class. Although his parents were satisfied with the grade, Kieran has imposed very stringent standards upon himself. He was disappointed at receiving a B. I indicated (to his mother) that I was concerned with the pressure he exerts on himself, and I hope that he will relax a bit more.

Kieran's response was to work harder and learn from his mistakes. As long as he knew he could and should do better, he was able to handle the situation.

Organization was extremely important to Kieran. This helped him earn high grades and maintain his high standards. While his parents had high expectations for him, his were even higher:

> My parents don't expect me to do the best. My teachers, that I 'm not expected to do the best, but sometimes, I, and I know, myself, that I don't push myself to be the best. But in some places, I would, you know, like to have that feeling.

Those "places" were tennis and math. It was interesting that Kieran had stomach aches and an "empty stomach" feeling when he was nervous about school work, but not for tennis. He rationalized that tennis was only a game, while school grades were important because his future was dependent on them. He was nervous "a lot," but used self-talk to cope with his perfectionism. When asked if he ever felt overwhelmed by wanting to have everything perfect, Kieran responded,

> Yes, I think I feel that way. I feel that sometimes I may go too far and try to be perfect, and I just say, you know, it doesn't have to be exactly how I want it to be, if teachers are lenient.

He could still put in less effort and get a high grade, but he struggled with his own standards to have everything correct, neat, and organized. If given a choice, he preferred to work alone or in small groups in his accelerated classes:

> I'd prefer to work alone, but if I get the chance to work in a group that will work, get work done, cooperate and stuff, I'd do it.

He did not like mixed ability groups because he thought he shouldered most of the work when his peers "didn't strive to get work done." He felt angry and frustrated when this happened, because he was used to doing quality work. It was time consuming to be in mixed ability groups, since he had to be more organized and neater to do the work of other people in the group. He had to be more perfectionistic in order to create a quality product which would earn him, and his group, a higher grade. He didn't share his frustrations with his teachers, because

> I feel that I don't want to let people down. If I let them down, I feel like they're looking up to me, and they expect me to do the best.

He didn't want to disappoint his teachers because they depended on him to be a leader in his group. So Kieran "just did it," continued to be more perfectionistic, and earned his high grades and accolades. Participating in the Jazz band, playing tennis, and talking himself through frustrations were Kieran's ways of coping with his own perfectionism and the stresses of school.

At the end of eighth grade Kieran still loved coming to Brenan Middle School, despite the stress he experienced. He was anxious and excited about going to the high school. There would be more opportunities to be in advanced classes, and he looked forward to the challenges and being even more successful while doing his personal best.

Caitlin

Caitlin came to school because she loved to learn and work hard. Socializing with her peers was not important to her, because she felt different from most of them. When asked if she got along with all the kids at school, Caitlin responded,

> No, because we share different views, or we just don't—we're not the same personality. It just doesn't work . . . . There's only like some people who are like me or really connect with me, but a lot of people don't.

It was hard to imagine Caitlin not getting along with anyone. Her neat appearance indicated a typical Brenan Middle School "uniform"—jean shorts, T-shirt, and suede shoes. Her long, wavy auburn hair framed a face dotted with freckles, and her dark brown eyes reflected a serene intensity. Caitlin carried her slight frame with an air of confident elegance. She walked slowly down the hallways—a young woman with a silent mission. Her shy, quiet mannerisms belied her passion for learning and her goal to be a veterinarian with her own practice. Few peers understood that this quiet, unassuming eighth grader had an intense motivation to do well. Once Caitlin explained her goals and her view of school and the world, it was clear why she "connected" with only a few peers. She was comfortable with not being popular, for success meant much more than peer acceptance. Success was doing her personal best—and she knew she was successful.

Caitlin's shyness and determination had been apparent since she was in elementary school. Her first grade teacher noted her high motivation:

> Right from the start of the school year, Caitlin has done her best to achieve in first grade. She has consistently demonstrated an eagerness to learn and a willingness to take on new challenges. Caitlin has shown herself to be a steady, dependable student.

Steady, dependable, consistent effort, conscientious, cooperative, very hard worker, serious student, and shy—typical descriptors of Caitlin from kindergarten through middle school. Her grades and awards, especially in math, reflected these characteristics: B+s, As, A+s. She was named Scholar of the Month in eighth grade, an honor coveted by students in the accelerated courses.

Caitlin's parents separated when she was in third grade. This was a turning point for her, and Caitlin stated that her parents' divorce during fourth grade helped her to become more independent in everything she did. Health problems with a diagnosed mitral valve prolapse, asthma, and allergies did not restrict her self-directed personality. Caitlin continued to do well in school after the divorce, and worked very hard to succeed. Her fifth grade teacher noted her high organization abilities, and Caitlin herself believed that organization, combined with her independent nature and high abilities, were responsible for her success in school. She regarded herself as being perfectionistic only at school, where it counted. Perfectionism was when

> you try to do something to the point where—I don't know—just try to get it perfect. You try to do the best and you just can't stop until you think you've done the best.

> No mistakes. Getting like 100 on an essay or something, where you really, really work and work and work, and you just have to get 100.

This drive for perfection had helped Caitlin to try her best, as she believed it was important that she be competent in everything that she did, because it made her feel good about her accomplishments.

Standards were important to Caitlin, especially for her school work. She worked primarily to please herself, although sometimes it was for her parents and teachers as well. Her school accomplishments gave her the most life satisfaction, so when she did not reach perfection Caitlin felt as though she had disappointed herself. She did not dwell on her perceived failure, but worked harder to be successful and more organized. She welcomed constructive criticism, because it helped her to become better. Sometimes her friends found her perfectionism to be annoying, especially when she was so organized. For Caitlin, organization was central to her personality, and she was comfortable with herself. She thought some of her teachers fostered her perfectionism, because they urged students to be more organized.

Caitlin was particularly close to her mother who encouraged her to have high standards and to do her best. She spoke fondly of her mother, and how they did many things together and talked about "a lot of stuff." Their shared love of math was a strong bond between them. It was her mother who accepted Caitlin's personal best. She too had high expectations for Caitlin, but emphasized that "Everybody makes mistakes" when Caitlin was too hard on herself.

School success was significant for Caitlin, even though she only found challenge in her accelerated math and science courses. To her, high achievement in school meant future success. Caitlin was embarrassed about her procrastination that occurred when she thought the assignment was boring, not challenging, or she had more important things to do such as read mysteries or animal stories. However, assignments were always finished, neat, and as perfect as possible, even if done at the last minute. It was the perfection and working hard that was important to Caitlin, not the challenge of the assignments:

> If I want to do an essay or something, and I really want it to be very, very good or write a story or something, I work really hard on it for a while, and then when it's finished, I feel good. I just can tell (if it's just right). If I've worked really, really hard and I look back on it and think, wow, this is really good, then I know it's perfect.

While schoolwork was where Caitlin found her most satisfaction, she was not consumed by it. She was a talented singer and had been chosen to perform with the Brenan Middle School Select Chorus and the Junior Choir at her church. Caitlin also made a point of relaxing every day after school for at least an hour before she began homework. Participating in her church's youth group was significant, too, because they helped the community. This desire to help others was strong. She was a school library helper, and was working on plans to volunteer with a female veterinarian the coming summer.

Caitlin was a determined adolescent who acknowledged her abilities and focused on developing them. She believed that her perfectionism would help her accomplish her career goals, while she found balance in the rest of her life.

Dysfunctional/Neurotic Perfectionists

Emily

Emily swept the air with hand flourishes when she spoke. They provided a counter balance to her soft spoken voice. Her long brownish-blonde hair partially concealed brown eyes that lit up when she smiled. Emily didn't seem self-conscious about her braces, but her petite frame seemed hidden under a beige and tan patterned, bulky sweater.

Emily liked coming to Brenan Middle School because "there were sometimes problems at home." The fighting with her sisters, especially Phoebe, made her tense and anxious. She never knew what the atmosphere would be like at home, because it was dependent on her sisters' moods. They "insisted" on fighting, while she very much wanted to be the peacemaker in the family.

Emily's high abilities were recognized in elementary school and in middle school. Her desires to challenge herself to "do more and better," work hard, and be an example for others were noted by her teachers. Emily was a pleasure to teach because she was a conscientious student with a "sunny disposition." One of her eighth grade accelerated teachers remarked,

> Emily's average (A+) says it all! I was so happy when I saw her name on my class list. I very much look forward to another successful and challenging year with Emily.

She seemed like the all-round student: Scholar of the Month, a member of the Select Chorus, Art Club, a member of her church youth group, and an award winning runner. It was important that she did well to maintain her reputation, because she was afraid that people would find out that she was an impostor. Emily was an adolescent in turmoil.

From the time she was a little girl Emily felt the need to have everything done in a certain way. If not, she would work harder to do it over and over again until it was perfect. This continued and became intensified throughout elementary school. During this time period Emily's parents experienced several marital and health crises that had a major impact on her. In addition to always wanting everything perfect, Emily now believed her job was to make her parents happy. She was petrified that she might have to choose one over the other. Although her parents had resolved their issues five years prior, Emily still felt this way. She believed that her sisters weren't aware of the crises, because they were so little when they occurred. So Emily kept her fears hidden and had never talked about them. She didn't want anyone to know how she really felt.

There were other manifestations of Emily's fears. More than anything she wanted to be "a good girl" and make her parents happy by doing what she was told. She hated fighting with her sisters, and felt guilty if she became absent-minded about her chores. Negative criticism by anyone, especially her parents, was devastating. She believed that people thought she was perfect, and was concerned they would think less of her if she made a mistake. It was important to make everybody happy, and she would, "should," do this by being the perfect daughter. While she worked to please herself, others came first.

Emily had difficulty managing her time, in fact, it "more manages me." She loved to do things in depth, and would redo work if there were any mistakes. This inevitably made her behind in her work, which she found boring and unchallenging, except for science. Always rushing to catch up with work on which she had procrastinated, Emily was constantly being told to "slow down."

When asked if she had ever failed in something that was important to her, Emily responded with a look of horror on her face:

> It would be practically impossible. I wouldn't be able to fail. I wouldn't—it just isn't in my character . . . . I just couldn't accept failing. I wouldn't be able to.

She said it was just part of her personality to do well and be successful. Emily had a desire not to fail, and her concern over making mistakes prompted her to take a long time on assignments and to redo imperfect work:

> To do something just right. If I was—because I'm drawing something for the yearbook, if I made—because I've made lots of mistakes in them, if I made lots of mistakes and I erased them all, and I kept doing it and doing it and doing it. And then I got it just right and there were lots of erasures, then I would start over on a new piece of paper and keep doing it.

Emily was driven not to make mistakes, not to fail, not to let anybody down, not to be a failure.

Emily had a variety of coping mechanisms that she used. She read books that would help her to improve herself—to make fewer mistakes, be neater, and more organized,

> I'm really into like zodiac signs and stuff like that, and how to face your inner self and understand yourself. I try to understand myself and predict what's going to happen before so I can, like, get rid of them if that needs . . . .

She tried listening to music, running, reading, and deep breathing and imaging exercises learned in a health class, but none of these helped her to relax. Emily still bit her nails, tapped her fingers, and played with her hair when she was anxious, which was most of the time. She didn't sleep or eat well. She considered herself a "breadatarian" because her diet consisted mostly of bread.

Emily was an intense young woman who was very sensitive to people and situations around her. She spent a great deal of time thinking about herself, and how her actions would affect others. While she tried to please others, she still dreamed of her future. Perhaps she would be a linguistic anthropologist, an archaeologist, or a Broadway actress. Whatever career she selected, Emily wanted to be the best—nothing less.

Devon

Devon was a tall, lanky, handsome seventh grader. His ruddy cheeks and crystal clear blue eyes were framed by his neatly cut blonde hair. His movements were precise; his long fingers cut the air like a conductor orchestrating an important overture. It was difficult for Devon to make eye contact, and when he spoke it was with great seriousness and reflection. Long pauses were common in any conversation one had with Devon. Several of his fingernails looked swollen and sore; he picked at them when he spoke.

School was the most important thing in Devon's life. It came before friends, sports, Boy Scouts, or any leisure activity. School was his ticket to the future, and each day he worked hard to add perfect or near perfect grades to his report card. While Devon's life centered around his success in school, his early school experiences had been nightmarish for him. He spent five years at a private Christian school where his high abilities were noticed in preschool, but his behaviors did not correspond to the rigid standards:

> Devon enjoys challenging learning experiences. He is a hard worker and a capable student. He needs to pay closer attention to directions . . . . His cognitive ability *exceeds* his physical, social, and emotional maturity. Devon has had tremendous difficulty "conforming" to our class. He frequently appears to be "on the edge" of our classroom activities, passively observing instead of actively participating. It is not at all unusual to observe him making faces and "squinting" restlessly, as if he has entered another dimension of thought. He is easily distracted and his attention span is very limited—unless we are doing something he really enjoys. He is very resistant to any corrections on his papers.
>
> Devon is a strong-willed child, *very* determined to do "his own thing."

Devon was a very bright boy who was asked to conform to a routine of worksheets starting in kindergarten. He was retained in kindergarten because of his lack of social and emotional skills, and his inability to adapt to the strict rules. During the same period of time his parents were having marital difficulties, and there was little discipline at home. He reacted to both situations by acting out his frustrations at home and at school. Looking back on this experience, Devon said it was a terrible time for him. He craved order and challenge in his life, and seemed to receive neither. Talking about this time was painful for Devon, and even more for his mother, as she felt tremendous guilt for having sent Devon and his brother to this school. She thought it would be bring some structure to their lives, but unfortunately, she said the demand for "perfect behavior" had a terrible effect on Devon.

When Devon entered the Eastern School District, he was an extremely bright little boy whose teachers considered him out of control. Devon stated that he still felt bored during this time, but that his third grade teacher and the school psychologist worked with him to help understand and control his temper flare ups, as well as his need to always be right. A speech problem that was noticed in kindergarten was addressed, and his fine motor skills improved. Devon reached a turning point in fourth grade:

> Probably since fourth grade I thought I don't want to have any more behavioral problems or just have my life wasted. I wanted to do something in life, so I should start by trying harder and trying to do good in school. And that would give me a good jump on life. So I think that helped me even try harder with perfectionism.

"Try harder" had become Devon's mantra in fourth grade. His whole life revolved around becoming successful—getting into a "good" college and getting a "good" job. His teacher noted he was always worrying about "the next test." Devon seemed to have transformed from an aggressive little boy to a shy, withdrawn fourth grader.

At Brenan Middle School Devon focused his energy on his high abilities and doing well. His perfectionism helped him to achieve, because he viewed success as being thoroughly competent in all he attempted, with few, if any, mistakes. His greatest fear was not doing well in school and messing up. He doubted his actions and became upset over mistakes. He hated being less than the best at anything, except art, which he disliked because he didn't have any ability or interest in it. Devon believed the only way he could prevent mistakes was to work harder than anybody at all times. His teachers viewed him as a hard working, conscientious, dependable, and "intellectually eager" student. He had become a "pleasure" to have in class.

Devon had few close friends, aside from his brother, because he believed he didn't have much time he could allot for friendships. He thought his perfectionism had been helpful with his peers, and that most viewed perfectionism as positive because it propelled them to work harder and earn accolades from the teachers. His classmate, Annie, in

particular, "pushed" him to work harder and do the best. He analyzed what she did to get a higher grade, so he could then work harder to achieve a similar grade.

It was extremely important to Devon that his teachers perceived him as a hard worker and a successful student. Failure was devastating to him. In sixth grade he lost a race in the Greek Olympics and felt terrible when he didn't win. He "should have" met everyone's expectations that he would win. He replayed losses over and over in his mind:

> And then sometimes after a test or race, I feel like I could've done better. I could've practiced harder, or studied harder, and I could've done better than what I did. So that happens to me sometimes when I don't do as good as I would want to. Most of the time I feel like I could've done better if I just tried harder.

When the local paper printed an article about a fellow student who had received national recognition on the Scholastic Aptitude Exam (SAT), Devon lost sleep for several nights in a row. His mother said he couldn't go to sleep:

> Something made him just think about that, and he kept saying, 'Now if I had studied ten more minutes a night,' he said, 'do you think I could have gotten over'—he didn't necessarily mean he wanted to beat (his classmate), but he wanted to get over the 1,000 to get a certificate. And he said, 'I only needed like sixty more, could have . . . .' And he just kept thinking about that, over and over again.

"If only" he had studied harder, he would have been successful. Devon took a long time to do something "just right." Doing it over and over again until it met his standards was how he spent most of his time.

Devon believed that his parents put pressure on him to try his hardest and get good grades. If his parents became angry when he "messed up," Devon would get mad at them and himself. Sometimes he would yell back or keep to himself, but always he would try harder.

Devon described himself as being organized and neat. He said he was happy, even though his happiness was dependent on how well he was doing in school:

> Yeah, I'm happy because I'm doing well in school. I enjoyed this interview. I'm going to the (Boy Scout) camparee today. Plus I had a big English test today and I'm almost positive I got a hundred. And I don't really have that much homework. So all those things add up to being happy.

Devon decided not to go to the Boy Scout encampment. He said he had to study for the exams that would enable him to take accelerated courses in eighth grade, and the exams were over a month away. He needed to study, especially those extra ten minutes a day.

Mary

Mary described herself as "friendly, smart, above average, well-liked, outgoing, and very happy." She wore a midnight blue team baseball windbreaker over her short, slight build. Her bib overalls, white T-shirt, chunky black shoes, and no jewelry or make-up gave her the appearance of a much younger student. Mary had a quiet demeanor about her, and was deliberate in her responses to questions.

From the time she was little, Mary experienced the need to be neat and organized, and she was constantly concerned about making mistakes. It was important that she be "on

top, right, and accurate at all times." From kindergarten through middle school, her teachers had remarked that Mary was a hard working, dependable, neat, and organized girl who put excessive pressure on herself to always do her best and succeed. Her second grade teacher noted that she worked hard to please everyone. Mary's mother shared with this teacher that,

> since Mary was their first child they had been kind of hard on her and expected her to do things correctly when she was younger. They now realized that perhaps they were too hard on her . . . .

Mary's third grade teacher stated that Mary sometimes became upset if she didn't do as well as she expected to do on assignments. A discussion by this teacher and her mother focused on Mary's sensitivity about making mistakes, and the teacher urged her mother to emphasize that everyone makes mistakes. This was again repeated in fourth grade when the teacher noted that Mary put a lot of pressure on herself to excel. She made careless errors and then become very upset with herself. The teacher exhorted Mary's mother to "encourage her to try her best, but not be too hard on herself." Mary's behaviors continued in fifth grade, however, when Mary would work too quickly on assignments, make careless errors, and then become upset with herself. She would then work harder to maintain her straight A+ average.

Mary continued to earn high grades in middle school. Her grades gave her the greatest satisfaction, but she worried constantly about making mistakes. She felt pressure to maintain high grades from herself, teachers, and her parents, especially her mother. Mary thought her mother wanted her to always do "the best." She hated the comparisons with her younger sister, who always got As on her report card. Mary believed that she was a failure in her relationship with her mother.

Criticism from her mother and being isolated in her country home were factors that Mary regarded as contributing to her loneliness. She preferred being at school, even though most of the work was boring and repetitious for her. She could "accomplish things" at school, but not at home, and she dreaded summer vacations, when there was nothing to "accomplish" at home.

Mary believed that she was in constant competition with her friends to earn As and to look good. She had recently started to be concerned about her weight and looking thin. Mary thought her female friends were also perfectionistic, perhaps even more than she, and she believed that they all had high standards, more so than the boys. Mary was part of the "preppie" crowd, and maintaining high grades was important to keep that status.

One behavior that Mary emphasized was her need to repeat things over and over:

> I become very upset over wrong things. I replay over and over in my mind what I did wrong, never let myself forget it. I correct and redo everything so I'm almost positive it's right . . . . Well, when I feel stressed out, I usually—sometimes I do things over and over again, even though it was right . . . .

Mary had a hard time sleeping, because she replayed events over and over. She couldn't stand to let anyone down, especially her teammates, and if they lost a game, she believed it to be her fault. Mary felt anxious about new events, guilt about "messing up," and frustration when she "should" have been able to do something, but couldn't. During an exam in sixth grade, she became paralyzed when she couldn't answer a question:

> When I was taking an exam, I was unsure of a lot of answers. And there was no way I could have studied for it. It was just everything I've learned the past years, and

> I was like so worried that I had stopped in the middle of the test a few minutes . . . . I went to the next question, and the next question, and then I finally found something I remembered.

Instead of being relieved, Mary continued to worry until she received the test back:

> And I got an 80 something, so I passed it. But it wasn't as good as I could have . . . . I was angry that I didn't know it.

Mary would redo things or work harder before she would consider accepting a less than perfect product or performance. She acknowledged she was hard on herself when she didn't meet her high standards. Playing the piano and reading helped her cope a little when she felt less than perfect.

Mary's vocabulary was replete with "shoulds" and wishful thinking. She should study harder, should stop making mistakes, should stop rushing, and should not be a failure. She wished social studies was easier, that her mom would praise her, and that she was thinner. Mary did not have a specific career in mind for her future, but looked ahead in terms of grades and her parents:

> I hope that I'm successful in a job that requires that someone has to go through a lot of schooling with good grades. And something I can show off to. And I'm living on my own without my mother's help and my father's help. And I can manage most things by myself.

It was important for Mary do to do well in school because of the future, but pleasing herself and her mother were more significant. If she did well now, Mary believed she would keep her friends, the teachers would continue to praise her, and her mother would like her more. All she had to do was work harder.

Main Themes

Healthy/Normal Perfectionists: Order and Organization

The healthy perfectionists generally believed that perfectionism was a part of their personality. The main theme that emerged in this study related to the need for order and organization in their lives and their quest for achieving their "personal best" since childhood. Descriptors such as "personal best," "very organized," "doing everything right," "correct answers," and "trying your hardest" were incorporated in their definitions of perfectionism. Stephanie's response that perfectionism was "doing your personal best and being very organized" was typical of this cluster.

Most of the healthy perfectionists were aware of their perfectionistic tendencies since they were young. All of the female participants recalled first memories related to school activities, and they discussed their need to have their work organized and in correct order. A statement by Barbara expressed the feelings of these gifted female adolescents when she stated, "I know I was really worried when I was a little kid . . . about like everything had to be perfect." The healthy perfectionistic males who had first memories of being perfectionistic, however, noted their memories were connected to home or sports. Perfecting a skill level or wanting everything to be neat and organized were early memories of these males. Not all of these memories of both females and males reflected a similar

pattern; some revealed embarrassing situations, others a response to a positive comment by a teacher. Most memories, however, reflected a desire for neatness and order.

The participants stated that the need for neatness, order, and organization became more apparent when they entered Brenan Middle School. They had more teachers with different expectations, requiring them to be more organized in order to adjust to each teacher's regulations and demands. The healthy perfectionists used their organizational skills to avoid feeling stress and to maintain their own high standards. Two factors evolved which influenced the healthy perfectionists' need for order and organization in their lives: their support systems and the personal effort that they believed was necessary to be successful. Figure 1 illustrates the main theme of order and organization for the healthy perfectionists which results in their quest for achieving their "personal best." The factors of support systems and personal effort impact the need for order and organization that the healthy perfectionists experience in their lives.

Support Systems

All of the healthy participants stated that they felt supported by their families, friends, and teachers. The majority believed that at least one of their parents had perfectionistic tendencies, and most viewed parental perfectionism in a positive light. All of the healthy perfectionists received encouragement to do their "personal best" academically from their parents. Mistakes were part of learning and were acceptable. Representative phrases like the one below from Kate indicated what helped them to keep high standards, yet feel less pressured to be perfect:

> My mom says, she says, "Nobody's perfect." And she says, "the best that you can do, is the best that you can do." So, it's like, you know, if I'm doing really bad, like right now I'm not really good in gym, and my mom says that's okay . . . because I really try in gym.

Parents, siblings, and other relatives were mentioned as providing support for the healthy perfectionists. The majority of them derived great satisfaction from their families, and appreciated their parents' high expectations for them. Barbara's comment about her parents was also typical of the healthy perfectionists. She said,

> . . . they want me to succeed. They expect me to succeed. They definitely expect that . . . my parents think, believe, if you expect failure, you'll get failure . . . but they also don't want to set (goals) so high that it's like without control over your own life. So, they expect me to succeed and to try my personal best, and to do well and to finish what I started, and that kind of thing. But they don't expect that it's going to be perfect and excellent . . . .

The healthy participants repeatedly stated that they were urged to do their "personal best" by their parents and other important people in their lives. They believed that this was reinforced in school by teachers who encouraged neatness, organization, and doing well on assignments.

Friends were an important support for the healthy perfectionists. Many were a part of the "preppie" group at school who strove for perfection in their schoolwork and appearance. Competition was viewed as generally healthy by most of the healthy perfectionists, because they believed they motivated each other to do well.

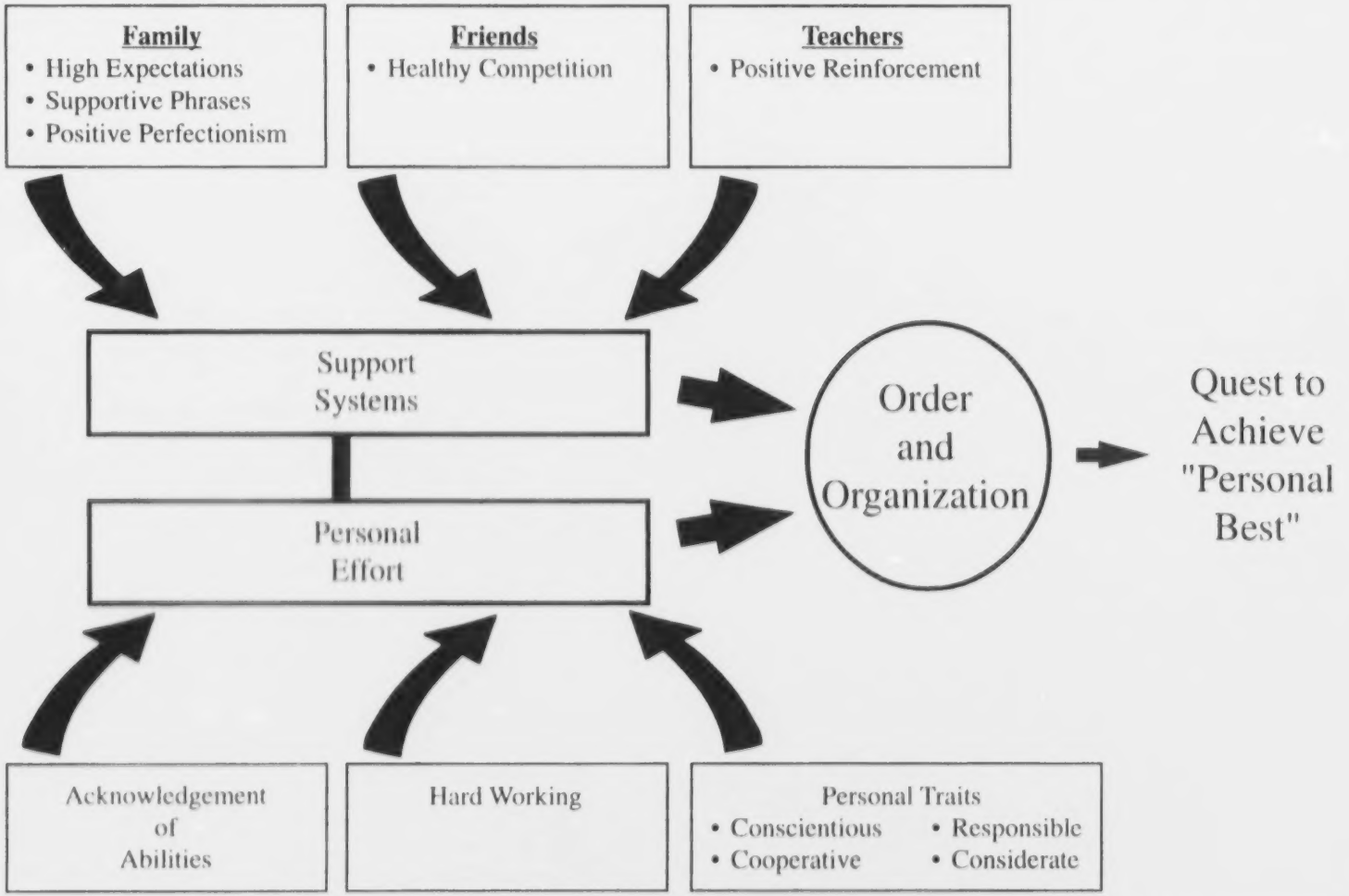

Figure 1. Main theme of order and organization for healthy/normal perfectionists and related factors of support systems and personal effort.

Personal Effort

Tracey defined perfectionism as "just doing the best of your abilities," but she also believed that it was more complex than individuals using their determination and skills to do the best of their abilities:

> You have to be at least good at what you do or else you—you shouldn't, you can't be perfect at something that, I mean, you have to try and try and try and then always . . . you're always going to keep getting better at whatever you do. I mean, you can't . . . ever do anything perfect or play anything perfect, an instrument, or something, because there is always one little thing you can always work on to make it better.

Personal effort was viewed as an important aspect of their perfectionism. Working hard and doing one's "personal best" were synonymous to the healthy perfectionists. All of them acknowledged that they had high abilities, but it was their drive for perfection and their hard work that made them successful. If they made mistakes or were experiencing difficulties, they would work harder to relieve their frustrations. Their cumulative records were replete with teacher comments that they were responsible, organized, cooperative, considerate, and especially conscientious hard workers, and their personal efforts made them a "pleasure to have in class."

Dysfunctional/Neurotic Perfectionists: Concern Over Mistakes

The main theme that emerged in this study for the dysfunctional perfectionists was their fixation about making mistakes which results in their high state of anxiety. Their definitions of perfectionism focused on not making errors. Phrases such as "not messing up at all," "no mistakes," and "no screw-ups" were common. The meaning Mary gave to perfectionism and the accompanying feelings were representative of the dysfunctional perfectionists when she stated,

> I believe perfectionism is when someone must be on top, right, accurate at all times. When they are wrong they feel they haven't succeeded. Maybe after that they feel less confident.

Other definitions focused on redoing work, having work done in a certain way, and correctness. Only one participant from this cluster, Devon, defined perfectionism as doing one's personal best.

Like the healthy perfectionists, most of the dysfunctional perfectionists thought that perfectionism was part of who they were, and they each had early memories of being perfectionistic. These memories for both males and females were related to school or home, and were focused on making mistakes. Phoebe, for example, still felt angry about being teased by a teacher in front of the class for handing in less than her usual perfect work, and Devon recalled how a teacher's flattering remark about the neatness of his work set the standard for the quality of his work for the remainder of the school year. Emily's experience about making mistakes and doubting her actions, both at school and at home, was representative of the dysfunctional perfectionists. She remarked,

> And I'm always worried that I might make a mistake—like read a question wrong, because I did that on the last exam. I said I must go over this . . . . And I found out that I had skipped a question, and all my answers were all wrong down below it. And so I had to write them all over again. And I finished like one second before he took them in . . . . I was very anxious to get them done.

The dysfunctional perfectionists were concerned about making errors because of their own high standards and those of their parents. To make a mistake would be an admission that perhaps they weren't so bright after all. They would become angry with themselves when work or test scores didn't meet their personal standards, especially if others would notice. They feared embarrassment, either in school or at home. As Mary explained, "I get angry that I messed up, or I made a fool of myself in front of everyone." For the dysfunctional perfectionists, mistakes were not opportunities to learn, but humiliations to be avoided. They lacked positive coping strategies to deal with mistakes. Replaying events in their minds, wishing they could redo events and tests, and having memories for the smallest detail about mistakes from years earlier were common among the dysfunctional perfectionists.

The two factors which emerged that impacted the dysfunctional perfectionists intense concern over mistakes were the perceived expectations that others might have about their abilities and their identities, and the perceptions of others' criticism about their actions. The main theme of concern over mistakes for the dysfunctional perfectionists is presented in Figure 2. The influence of their perceived expectations and perceived criticisms are illustrated.

Perceived Expectations

The majority of the dysfunctional perfectionists worked to please others—teachers, peers, or parents. Most believed that at least one of their parents was perfectionistic. Unlike the healthy perfectionists, they viewed their parents' perfectionism negatively. This perception was related to their perceived parental expectations that they be perfect in everything, especially in school. Since they had been A students in elementary school, they were expected to maintain that status in middle school. The dysfunctional perfectionists heard phrases like, "Don't fail," "Do the best," "Where are the As?" "You should do better." They interpreted these comments not as motivators but as criticisms of their efforts. This led them to be highly critical of themselves and possess an intense concern over making mistakes. For most of the dysfunctional perfectionists, their relationships with one or both of their parents gave them little satisfaction. Many would become angry with their parents and themselves when they failed to meet their expectations.

The dysfunctional perfectionists believed that their teachers, friends, and peers also expected perfection from them. Comments from teachers about letting work slide, or "only getting a B" made them work even harder or start to procrastinate. This pressure to work hard was a result of their often intense sensitivity to others' reactions to everything they did, as in Annie's case. People counted on her to be perfect. It was an image that she had "built up over the years in everybody's mind"—the straight A, studious person. Not only had she experienced racist remarks, but she continued to be teased by her peers about being "too smart" and "too perfect." She was a leader in the "preppie" crowd, and she worked very hard to maintain this position. Several of the other participants in this study mentioned her as the most perfectionistic, competitive classmate they had. Annie was always comparing grades and scores, wanting to "best" others, and doubting her actions. She had trouble dealing with the perfectionism of the twins, Barbara and Gretchen, and this made her work even harder. When she didn't earn a perfect score, some of her peers would sarcastically say, "Better work harder and study." And she did. Like Annie, the dysfunctional perfectionists worked hard to meet the perceived expectations of others and themselves.

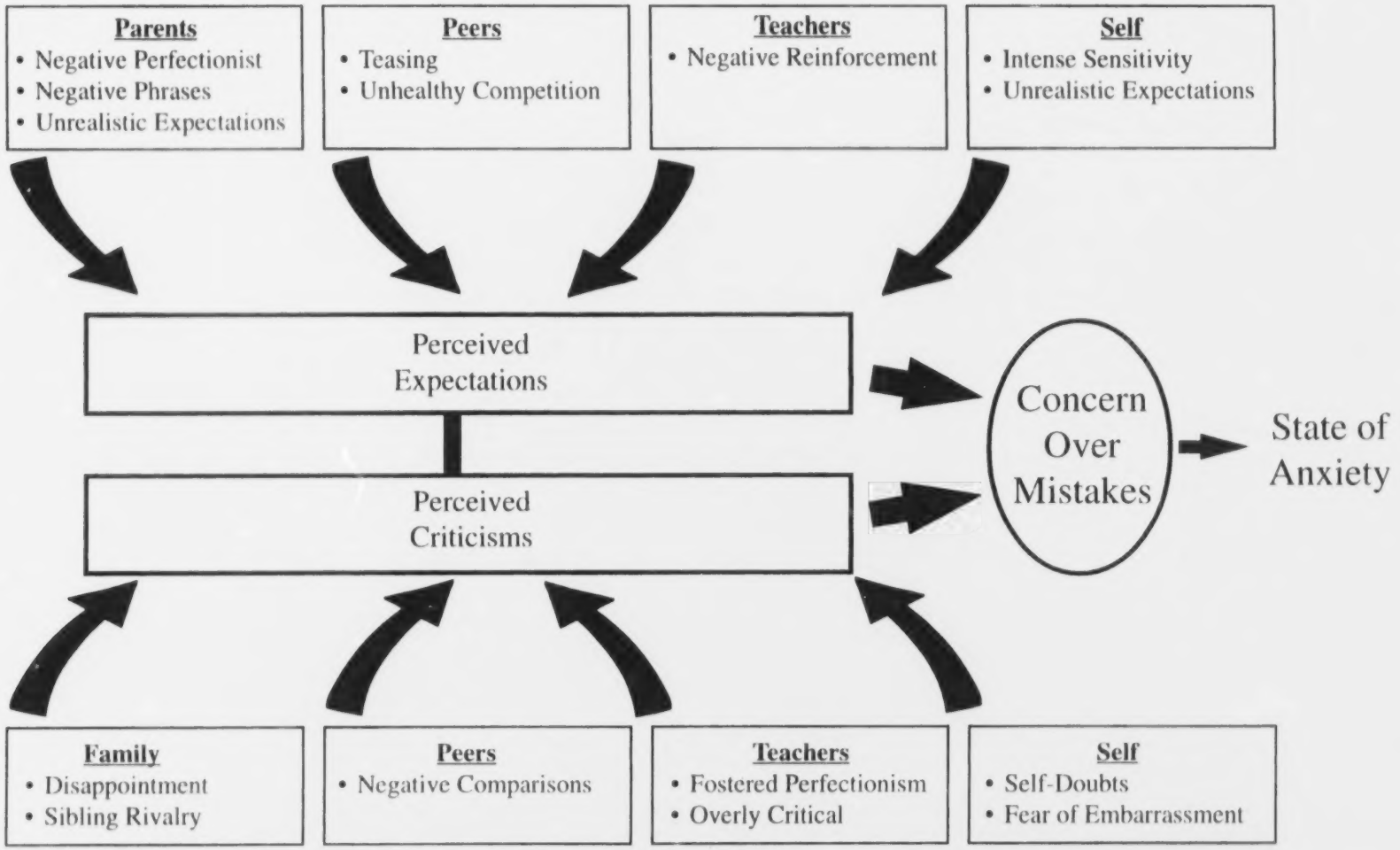

Figure 2. Main theme of concern over mistakes for dysfunctional/neurotic perfectionists and related factors of perceived expectations and perceived criticism.

Perceived Criticisms

The dysfunctional perfectionists perceived that their efforts were always under microscopic review by family, teachers, friends, and themselves. If they could not be perfect and meet their own and others' expectations, they believed they would be criticized. Many lived in a high state of anxiety and doubted their actions, because they never knew if what they were doing was going to be good enough. Devon, for example, felt this insistence to do well from his mother, and had difficulty accepting criticism from her. He thought she became more upset than his father when she felt he had not lived up to his own, and her, high standards. Devon stated that the doubting of his work and concern over mistakes came from his mom's critical attitude, explaining,

> I think I got that from my mom, because she usually, even though after she does everything she makes sure she does it perfect. She still worries if she actually did do it perfect.

The dysfunctional perfectionists worked very hard to avoid criticism, either at school or at home. Some stated that they had been punished for not being perfect enough. Annie worked hard to gain her father's approval by getting As, so as not "to be punished:"

> Well, not punished, like physically, but you know, I feel kind of like, you know, sometimes something won't be perfect, and my father just gives me a look that's like, you know, disappointed in me. And that's really hard. Because, it's just as bad as a physical punishment . . . .

Perceived criticism came from other places as well. Some of the dysfunctional perfectionists believed that their peers, especially the "preppies," fostered negative competition and criticism by always comparing grades and assignments. This added to their pressure to do well and work harder. Sibling rivalry was an issue for Emily and Phoebe, who were both dysfunctional perfectionists. Each criticized the other's performance both at home and at school. Many of the dysfunctional perfectionists thought that some of their teachers were too critical and fostered their perfectionism because, as one participant stated, they were "too picky." Yet, some stated that they liked the emphasis on neatness and organization, because it helped them do "the best." The consequences for the intense perceived criticism were doubts about their actions, procrastination, repeating work over and over, taking an exceedingly long time to complete tasks, and constant anxiety and worry.

Phase I

Research Question 1

This section addresses the findings from Phase I of the research which was concerned with research question 1, do gifted adolescents in a rural middle school possess perfectionistic tendencies and, if so, what are the manifested characteristics and behaviors?

The Goals and Work Habits Survey (Schuler, 1994) was used to collect data in Phase I of the research. The survey was distributed to potential participants to determine their eligibility for the study and to obtain basic information about them. A cluster analysis of the scores was performed and three clusters were established. Potential participants were clustered in either the nonperfectionistic cluster (Cluster #1), the healthy/normal perfectionistic cluster (Cluster #2), or the dysfunctional/neurotic perfectionistic cluster (Cluster #3). The latter two clusters were the subject of this study. Accordingly, results

from Phase I of this research are presented in four sections, including: The Goals and Work Habits Survey Overview, Responses of the Cluster #1 respondents (nonperfectionists), Responses of the Cluster #2 participants (healthy/normal perfectionists) on the Goals and Work Habits Survey, and Responses of the Cluster #3 participants (dysfunctional/neurotic perfectionists) on the Goals and Work Habits Survey.

Goals and Work Habits Survey Overview

Adolescents at Brenan Middle School who met the criteria for the definition of a gifted student were administered the Goals and Work Habits Survey. A perfectionistic adolescent was defined as one who received a moderate or high cluster score on the Goals and Work Habits Survey (Schuler, 1994). The identification of these students was accomplished by administering the Goals and Work Habits Survey, a modification of the Multidimensional Perfectionism Scale (Frost et al., 1990), to all the students ($N = 112$) in grades 7 and 8 accelerated courses. A majority of the respondent scores were in Cluster #2 (58.0% or $N = 65$), while 12.5% ($N = 14$) were in Cluster #1, and 29.5% ($N = 33$) were in Cluster #3.

Of the 112 seventh and eighth graders who took the Goals and Work Habits Survey, 46 were males and 66 were females. More males ($N = 9$ or 64%) than females ($N = 5$ or 35%) were nonperfectionists ($N = 14$), while there were more females ($N = 44$ or 68%) than males ($N = 21$ or 32%) in the healthy/normal perfectionistic cluster ($N = 65$). There were similar numbers for male ($N = 16$ or 48%) and female ($N = 17$ or 51%) participants in the dysfunctional/neurotic cluster ($N = 33$).

Responses of Cluster #1 Participants

Scores on the Goals and Work Habits Survey ranged from 44-82 for Cluster #1 or nonperfectionists. The mean scores of those students in Cluster #1 demonstrated characteristics of lower concern over mistakes, lower personal standards, lower doubts about actions, lower organization, and a lower total perfectionism scale mean score than those of Cluster #2 and Cluster #3. The perceived parental expectations mean is somewhat higher than those of Cluster #2. The mean scores of the factors and the total scores (does not include Order and Organization) for the respondents in Cluster #1 are displayed in Table 3.

Responses of Cluster #2 Participants

Participants for the study were selected from those clusters that represent perfectionistic tendencies, Cluster #2 and Cluster #3, based on grade level, gender, and birth order. Those in Cluster #2 were considered to possess healthy/normal perfectionism. The mean scores (range of 51-94) of participants in Cluster #2 ($N = 12$) show characteristics of: lower concern over mistakes, average personal standards, lower parental expectations, lower parental criticism, and average doubts about actions in comparison with the total mean scores and Cluster #3 mean scores. Participants in Cluster #2 also had a moderate total perfectionism score, as well as the highest order and organization score of all the respondents on the Goals and Work Habits Survey. Factor Scores for Cluster #2 (Healthy/Normal Perfectionists) participants are displayed in Table 4. Order and Organization is not included in the total score.

Responses of Cluster #3 Participants

Participants in Cluster #3 ($N = 8$) were considered to have dysfunctional/neurotic perfectionism. Their mean scores (range of 81-135) indicate the highest concern over mistakes, personal standards, perceived parental expectations, perceived parental criticism, and doubts about actions in comparison with all the respondents in the study and Cluster #2 participants. Factor scores of Cluster #3 participants are presented in Table 5. Order and

Organization is not included in the total score. A comparison of factor score means for the total respondents, Cluster #1, Cluster #2, and Cluster #3 are presented in Table 6.

Table 3

Mean Factor Scores of Cluster #1 (Nonperfectionists) on the Goals and Work Habits Survey ($N = 14$)

Subject Number	CM	PS	PE	PC	D	O	Total Score
73	9	13	11	4	7	21	44
15	11	21	9	8	6	15	55
65	15	19	11	5	8	9	58
107	17	17	9	6	9	14	58
59	12	25	12	5	7	19	61
12	13	23	16	5	7	18	64
77	14	17	11	13	13	18	68
22	19	16	12	12	11	18	70
32	16	33	11	8	4	11	72
128	16	20	22	7	8	17	73
113	22	26	13	5	9	13	75
10	17	22	16	12	9	19	76
61	17	25	19	11	10	15	82
127	18	24	22	19	8	8	82
Mean	15.42	21.50	13.85	8.21	8.28	15.35	67.00

Note. CM = concern over mistakes; PS = personal standards; PE = parental expectations; PC = parental criticism; D = doubt over one's actions; O = order and organization. Order and Organization is not included in the total score.

Table 4

Mean Factor Scores of Cluster #2 Participants (Healthy/Normal Perfectionists) on the Goals and Work Habits Survey ($N = 12$)

Participant	CM	PS	PE	PC	D	O	Total Score
Barbara	11	26	8	4	5	28	54
Gretchen	11	27	13	4	4	29	59
Kate	17	27	6	4	7	30	61
Stephanie	17	20	16	7	7	27	67
Jim	18	24	13	5	11	25	71
Rachel	21	28	8	5	10	30	72
Kieran	12	34	10	4	15	30	75
Tracey	16	31	14	7	8	28	76
Scott	12	23	20	15	8	23	78
Bob	16	25	18	11	11	22	81
Caitlin	21	27	17	8	11	30	84
Andy	19	32	22	8	13	30	94
Mean	15.91	27.00	13.75	6.83	9.16	27.66	72.66

Note. CM = concern over mistakes; PS = personal standards; PE = parental expectations; PC = parental criticism; D = doubt over one's actions; O = order and organization. Order and Organization is not included in the total score.

Table 5

Mean Factor Scores of Cluster #3 Participants (Dysfunctional/Neurotic Perfectionists) on the Goals and Work Habits Survey ($N = 8$)

Participant	CM	PS	PE	PC	D	O	Total Score
Phoebe	29	25	9	7	11	24	81
John	19	22	21	18	11	16	91
Eric	12	25	18	7	4	20	99
Emily	38	25	11	12	16	19	102
Devon	29	32	15	11	16	30	103
Fred	37	33	15	8	16	19	109
Mary	33	29	22	13	13	26	110
Annie	42	34	25	19	15	30	135
Mean	29.87	28.12	17.00	11.87	12.75	23.00	103.75

Note. CM = concern over mistakes; PS = personal standards; PE = parental expectations; PC = parental criticism; D = doubt over one's actions; O = order and organization. Order and Organization is not included in the total score.

Table 6

Comparison of Factor Score Means of Students on the Goals and Work Habits Survey

Factor	Total Mean Score	SD	Cluster #1	Cluster #2	Cluster #3
CM	18.89	6.23	15.42	15.91	29.87
PS	25.51	4.33	21.50	27.00	28.12
PE	14.68	4.16	13.85	13.75	17.00
PC	8.18	3.52	8.21	6.83	11.87
D	9.36	3.02	8.28	9.16	12.75
O	23.76	4.83	15.35	27.66	23.00
GWHS	76.62	14.34	67.00	72.66	103.75

Note. CM = concern over mistakes; PS = personal standards; PE = parental expectations; PC = parental criticism; D = doubt over one's actions; O = order and organization. Order and Organization is not included in the total score.

Phase II

The quantitative results from the Goals and Work Habits Survey provide definite characteristics and behaviors of the gifted adolescent respondents according to the characteristics Parker (1997) delineated for each cluster. Nonperfectionistic respondents indicated that they had low perceived parental expectations and low personal standards, as well as low organization. It also appears that these nonperfectionistic students have an average perception of parental criticism in comparison with their gifted peers. Because the purpose of this study was to examine characteristics, behaviors, and perceptions of perfectionistic gifted adolescents, nonperfectionistic students were not included in the interview process.

Phase II addressed the three research questions in the study, beginning with Research Question 1 which asked: Do gifted adolescents in a rural middle school possess perfectionistic tendencies and, if so, what are the manifested characteristics and behaviors? The gifted adolescents in this study demonstrated several kinds of perfectionistic tendencies through their behaviors, and teacher perceptions of these behaviors were somewhat different than theirs.

Behaviors

Six specific, overlapping behaviors are associated with perfectionism according to Hamachek (1978). They include: (a) depression, (b) a nagging "I should" feeling, (c) shame and guilt feelings, (d) face-saving behavior, (e) shyness and procrastination, and (f) self-deprecation. They describe both normal and neurotic perfectionists, but vary in duration and intensity. This was found to be the case in this study.

Depression

Hamachek (1978) stated that healthy and dysfunctional perfectionists perceived depression in different manners. Healthy perfectionists experience depression as an unsettling feeling and work to relieve themselves of any uneasiness. Dysfunctional perfectionists, on the other hand, feel a sense of no control over an emotional weight, using it to feel badly and to avoid work. Goldberg (1993) listed attitudes and behaviors of depressed adolescents which included: decreased school performance, loss of interest in activities, accident proneness, low self-esteem, concentration problems, talking or reading about death, social withdrawal, temper tantrums, anxiety, sudden gain or loss of weight, decreased energy, irritability, excessive risk-taking behavior, neglect of appearance, sleep problems, headaches, stomach and body aches, loss of interest in friends, guilt feelings, aggression, and suicidal thoughts or behaviors. In this study most of the healthy participants did not indicate any depressive attitudes or behaviors, or if they did, it was one or two behaviors. Many experienced anxiety about getting work done, but it was not at undesirable levels. In fact, most of the healthy perfectionists used this anxiety to their advantage to be more conscientious about their work. The degree and duration of depressive symptoms were based on the particular situation and the importance that was placed on its value. For example, Kieran complained of stomach aches before tests, but not before a tennis competition.

Only one participant in the healthy perfectionist cluster displayed several depressive symptoms in greater degrees than the others. Tracey was referred to the school counselor because her friends had found her vomiting after lunch. One of her teachers had noted Tracey's recent concerns about her mother's death, and Tracey regarded herself as a very critical person, especially about herself. This was occurring more often in school situations, and she also had been reading books about eating disorders and death, was feeling overwhelmed with all her commitments, and was having trouble coping with negative comments from boys about her appearance. Tracey's irritability was also happening more often at home, with crying, yelling, and excessive sadness the result.

Within the dysfunctional perfectionist cluster, all of the participants displayed a number of depressive symptoms. An interesting finding was that none of these students had a major decrease in school performance, except for Eric, who was getting low As and Bs instead of straight As. Anxiety, sleep problems, aggression, temper tantrums at home, and guilt feelings were common with these dysfunctional perfectionists. Except for Fred, each indicated that they were "stressed out" most of the time.

Stress was experienced by all the participants in the study, and the manifestations of this stress varied. In this study, sixteen of the twenty participants, including all of the dysfunctional perfectionists, stated that they possessed nervous habits: biting nails, rubbing hands, fiddling with fingers, snapping fingers, blushing, crackling knuckles, and stomach aches. Although thirteen of the twenty perfectionists had experienced some serious illness or accidents, including broken bones, pneumonia, osteogenesis imperfecta, asthma, and allergies. Only one participant, Phoebe, who said she was sick all of the time, stated that health was a stressful issue.

An interesting finding of the study was the various strategies the participants used to cope with their perfectionism when it became an issue. The healthy perfectionists used more positive techniques, including: problem-solving, self-talk, talking with peers, helping others, pacing their work or setting time limits. Mistakes or failures could be accepted only after they put forth their best effort. All said they worked harder as a way to cope with their perfectionism, because it motivated them to do well.

The dysfunctional perfectionists, on the other hand, used more negative strategies to address their perfectionism. Like the healthy perfectionists, they too worked harder, but it never seemed to be enough to satisfy them. In turn, they would affix self-blame to their performance. Eric's statement that, "I tend to beat myself up for not being as good as I want to be," was typical of these participants. None sought social support when they were stressed out; they worked harder to be more perfectionistic or neater, threw things, yelled, kept to themselves, sometimes blamed others, or took extraordinary amounts of time to do things. All wanted to be in control of situations. Several tried relaxing diversions such as listening to music or reading, but it wasn't enough to overcome the stress and guilt they were feeling.

Nagging "I Should" Feeling

Many of the participants in this study, both healthy and dysfunctional, had vocabularies that often began with "I should" statements. For example, all stated that they should do well in school now because it would impact their future. The healthy participants focused on what they were doing to accomplish their goals, while learning from past mistakes to do better. The dysfunctional perfectionists, however, dwelled on past accomplishments and what they should have done differently. Devon's obsession with how much more he should have studied to get a higher SAT score was typical of how the dysfunctional perfectionists kept past performances alive. Instead of learning from their mistakes, they wanted to relive the experience and change the outcome.

The perception of what constituted failure was different for both groups. The healthy perfectionists viewed failure as not doing one's personal best or not working as hard as one could, while the dysfunctional perfectionists viewed failure as the quality of the final product. For example, the healthy perfectionists would consider not putting forth their best effort into making a project perfect as failure, but the dysfunctional perfectionists would consider a final grade of less than an A on a project as failure.

The healthy perfectionists were not afraid of failure; the dysfunctional perfectionists were afraid of it. None of the healthy perfectionists had ever experienced, what they would consider, a major failure in their lives, but all of the dysfunctional perfectionists stated that they had. These failures ranged from being cut from the basketball team, to not handing in homework, to parental relationships. Most stated that their fear of failure was linked primarily to school performance and not disappointing others who they perceived would be upset if their performance was less than the best. Not only were these students highly critical of themselves, they were also critical of those whom they wanted to impress, especially a parent or other perfectionistic peer. They disliked any kind of criticism, because it made them feel frustrated about their efforts and abilities. Sometimes this frustration resulted in procrastination until the last minute to do work, or developing an ever vigilant attitude of not missing any detail that had to be done. John's procrastination with school work he found unchallenging and the resultant guilt feelings were typical reactions of the dysfunctional perfectionists who had an intense fear of failure. Distorted or inappropriate expectations, whether their own or others, added to their pressure not to fail.

All of the healthy perfectionists viewed themselves as successful in life (school, home, sports), and while criticism was not always welcome, it was not abhorrent to them. What criticism they did receive came primarily from peers and from teachers' comments about their work. Most perceived criticism as positive, and their reaction was to work harder, because they were trying to learn from their mistakes. All of the healthy perfectionists found great satisfaction in their lives, ranging from family and friends to school and sports. Several found satisfaction with every aspect of their lives. School was an area most of the healthy perfectionists found satisfying, except for Scott who preferred sports to schoolwork, and Bob who hated English class. Only two, Caitlin and Stephanie, found their relationships with a parent to be the least satisfying aspect of their lives.

The dysfunctional perfectionists were not as definite in their beliefs that they were successful. Expressions such as "leaning toward successful," "probably successful" or "try to be successful" were indicative of the self-doubts they felt. Criticism was a major concern for them; their perception was that it was negative, especially when it was given by someone important in their lives. They had a low tolerance for mistakes, and it was difficult for them to set priorities in their lives. Less than half of the dysfunctional perfectionists found their greatest satisfaction in school. While the healthy perfectionists' satisfaction was connected primarily to relationships with others, the dysfunctional perfectionists found satisfaction in solitary pursuits. Sports, crafts, computer, reading, and creative writing were activities mentioned. Only one participant in this cluster found great satisfaction with family relationships, and only one stated that being with friends was the most satisfying aspect of life.

Most of the dysfunctional perfectionists stated that the least satisfaction in their lives was with their home life. Specific areas were parental pressure to do well, absence of a parent, doing chores, sibling relationships, or no time for individual interests. All expressed a common concern about upsetting or disappointing their parents, and wanting more recognition for their accomplishments. A statement by Mary reflected this desire,

> . . . and maybe saying, like maybe a reward, like if I get all As, then we could do something together. But she [mother] would usually just say, "Good job," and it doesn't seem enough . . . because she just expects me to get As, and if I do get As, it's just a good—but if I was maybe a B student and brought them all up to As, she would be more happy for me, and praise me more, maybe.

Becoming a paralyzed perfectionist has been noted in the literature as a possible consequence of this fear of failure. This was not the case in this study. Only four participants in this study stated that they had experienced this paralysis. Tracey's account was typical of their frightening experience,

> Oh, my gosh. So many times. I had a concert one night and there were writing assignments due. There was a book report due. We were working on our drug project. And I had math homework. I had a social studies section review. And it's not that I procrastinated, but I wanted to get some things done and I just sat there and I wouldn't eat dinner. And I just sat there and then these tears started to form in my eyes because I couldn't handle all this work. And then that was just making me feel even worse because like—oh, I'm never going to get this done. I'm not. I'm not. And I was just like, why can't I just go to sleep and then wake up and everything is done . . . . It's like a panic . . . .

Andy, a healthy perfectionist, also had felt helpless and unable to concentrate when his grandfather was hospitalized, as had Annie when she learned that a friend had slit her wrists. Mary, a dysfunctional perfectionist, had experienced panic when she couldn't answer a

question on an exam. This performance paralysis, while a very frightening experience for these participants, was not a common characteristic of either the healthy perfectionists or the dysfunctional perfectionists.

Shame and Guilt Feelings

Hamachek (1978) defined the difference between shame and guilt. Shame is the feeling of not living up to another's expectations, while guilt is the feeling of having betrayed one's inner standards. Hamachek believed that young perfectionists would experience more shame than guilt. In this study the participants expressed more feelings of guilt than shame in their lives. Seventeen of the participants acknowledged that they experienced guilt in different degrees and for a variety of reasons. Kate made a statement that was typical of the healthy perfectionists who had the lower total scores on the Goals and Work Habits Survey:

> I'm not really guilty really easily. Like I said something about someone and they got really hurt or something like that, then I'd feel guilty. But, like most of the time, I'm not that guilty. Like I don't feel too—I don't have many guilt trips or anything like that.

As the total scores of the participants increased, the reason for guilt feelings began to focus more on school related issues—not doing homework or doing work and getting credit for it. Annie's remark typifies the guilt that resulted from not putting forth effort:

> If I wait till the last minute to do something and I hand something in that like's really nice, and I still get an A or something, and someone who puts like all effort into it and everything, and like gets a B or something . . . and it's like really hard to see other kids who worked really hard and get like a lower grade, and I feel guilty because they worked harder than I did and I got the better grade.

Those participants who had expressed the most concern about meeting the expectations of others experienced both shame and guilt. Mary's comment was representative of those who felt responsible for the outcome of a group project or team game. She stated that she felt shame and guilt when, ". . . maybe if I do something wrong, or like I mess up and let down my whole team."

Face-Saving Behavior

An interesting finding of the study concerned those perfectionists who did not want to appear incompetent. Many of the participants in both clusters sought extra credit in courses where they felt they weren't as competent as their peers. Devon's time consuming effort to do extra credit in Art in order to maintain an A average was typical of the participants. It was frustrating not to be good in every subject

> . . . because a lot of times the kids get the projects done and I have to take it home and do some and stay in help period and do some. I did a lot of extra credit projects in art to make sure I got an A, so it frustrates me that I have to take more time and do everything to get the A than most of the kids.

Many of the participants had several A+s on each report card starting in middle school. Even the healthy perfectionists who were doing their personal best chose extra credit projects, sometimes because the additional work was more interesting than the regular work or because they may have gotten a perceived low grade and wanted to maintain an A or A+ average.

Shyness and Procrastination

Two methods Hamachek (1978) mentioned as face-saving behaviors were shyness and procrastination. Many of the participants in both groups acknowledged procrastinating on assignments or chores, but it was more apparent with the dysfunctional perfectionists. They would procrastinate more on assignments that were less of a challenge or in subjects in which they didn't feel especially competent. Negative results for procrastination were not a major problem for most of the participants in this study, because most handed the work in on the due dates. They would procrastinate doing the work until the last minute, but in the majority of cases would meet the deadline for submitting the work. Only three participants (Bob, Eric, and John) experienced negative consequences, warning notices in their school records, which indicated late assignments.

Shyness was an issue for some of the participants in this study. While many of the participants considered themselves more introverted than outgoing, only seven participants indicated experiencing anxiety about embarrassing themselves in front of others. Of these, three were the Korean-born females: Kate, Tracey, and Annie. Annie expressed the importance all seven attributed to appearance and not being embarrassed:

> Embarrassment. I don't like being embarrassed. I just don't like it. I don't like feeling empty . . . . A lot is based on appearance, like no matter what people say, like a lot of things are based on how things look, how people look. And I work hard to make everything neat and everything . . . .

Like Bob, Stephanie, and Caitlin, Mary became anxious about speaking in public, and was afraid of embarrassment and failure in front of others in the classroom. One of her teachers remarked that Mary

> is a very good student who seldom participates in class questions/answer sessions unless specifically called on. She is always on task and has the right answer when called on.

Most of the participants who procrastinated did so in varying degrees, and also experienced shyness in varying degrees of intensity. Kate, Tracey, and Annie were more willing to participate in class than Bob, Stephanie, Caitlin, and Mary, but would retreat to shyness if they began to feel incompetent. All seven stated that they worked very hard not to be in that position.

Self-Deprecation

This complex psychological mechanism was not an issue for the healthy perfectionists, but it existed in the dysfunctional perfectionists. Self-condemnation of their work was distinctive for these students. Many expressed the attitude that, "*Next* time I'll do better, even if I didn't do a great job this time." This was particularly the case for those who procrastinated and yet asked for extra credit to raise their grades. The extra credit was the fallback when they didn't put in their full effort or didn't do as well as they had anticipated. Their self doubts about their work led them to focus on their mistakes and diminish any excellent results.

Kinds of Perfectionism

Burns (1989), Elliott and Meltsner (1991) stated that there were several kinds of perfectionism. The majority of the participants in this study demonstrated performance perfectionism, in which individual worth is connected to success at what each person does.

The intensity varied from participant to participant, the value each attributed to performance, and the type of performance. All of the participants had very high personal standards and all considered themselves either "probably successful" to "very successful" in their accomplishments. Most of the participants demonstrated appearance perfectionism. Dress style, neatness, and impeccable grooming were important to over half of the participants, especially for the females.

A major finding in this study was a difference between the two clusters in other categories of perfectionism. For example, the dysfunctional perfectionists demonstrated moralistic perfectionism because their concern over making and accepting their mistakes was very high. It was difficult for them to forgive themselves, and sometimes others, for making errors. Eric's statement, "I tend to beat myself up for not being as good as I want to be," was representative of the dysfunctional perfectionists. This unforgiving attitude was related to identity perfectionism because of their perception that others, especially their parents, only viewed them as perfect human beings. Emily displayed interpersonal perfectionism during her interview when she took responsibility for the happiness of her parents and the protectiveness she felt for her sisters. Mary held herself fully accountable for her team's failures. None of the healthy perfectionists indicated moralistic, identity, or interpersonal perfectionism to the degree or intensity that the dysfunctional perfectionists exhibited.

Teacher Perceptions

The Empowering Gifted Behavior Scale (Jenkins-Friedman, Bransky, & Murphy, 1986) was completed by three or four teachers (mathematics, English, social studies, and science) of each participant in the study. This instrument was used to identify patterns of enabling and disabling perfectionistic behaviors in the participants. The possible range of scores for the EGB Scale is 11-77, with an Mean score of 41. In this study, the range of scores was 40.7 to 49.8, with the Mean 44.5 (SD = 2.46). A small standard deviation indicates little variability around the mean (Hinkle, Wiersma, & Jurs, 1988); therefore, the scores of the EGB Scale in this study suggest that the teachers had a consistent evaluation of the participants. Table 7 displays data from the EGB Scale and the total score of the Goals and Work Habits Survey for Cluster #2 participants, and the findings for Cluster #3 participants are presented in Table 8.

In order to understand the teacher perceptions, the mean scores for enabling, disabling, or a neutral rating were examined for each participant. The teachers perceived the majority of the participants as displaying more enabling than disabling behaviors. Half of the participants received at least one disabling behavior rating. Six participants (Stephanie, Scott, Bob, Caitlin, John, and Eric) received at least five neutral responses (4 on the scale). Caitlin, John, and Eric received more neutral responses than either enabling or disabling ratings. This might be attributed to the introversion, lack of interest, or conflicting gifted and underachieving behaviors they might have been demonstrating in the teachers' classrooms.

Table 7

Comparison of Teacher Scores on the Empowering Gifted Behavior Scale and the Total Score on the Goals and Work Habits Survey for Cluster #2 Participants ($N = 12$)

Participant	Empowering Gifted Behavior Scale Subject Area Teachers Completing Scale				Mean	EB	DB	N	GWHS Score
Barbara	M	E	SS	SC	44.3	9	1	1	54
Gretchen	M	E	SS	SC	44.3	9		2	59
Kate	M		SS	SC	45.7	9		2	61
Stephanie	M	E		SC	43.0	6		5	67
Jim	M	E	SS	SC	43.3	8	1	2	71
Rachel	M	E		SC	42.7	7		4	72
Kieran	M	E	SS	SC	49.8	6	4	1	75
Tracey	M		SS	SC	40.7	7		4	76
Scott	M		SS	SC	44.3	4		7	78
Bob	M	E	SS	SC	43.5	5	1	5	81
Caitlin	M	E	SS	SC	42.3	2	2	7	84
Andy	M	E		SC	42.0	8		3	94

Note. The range of possible scores on the Empowering Gifted Behavior Scale was 11-77. The Mean was 44.5 (SD = 2.46). M = Mathematics; E = English; SS = Social Studies; SC = Science; EB = Enabling Behavior; DB = Disabling Behavior; N = Neutral (4) rating; GWHS = Goals and Work Habits Survey

Table 8

Comparison of Teacher Scores on the Empowering Gifted Behavior Scale and the Total Score on the Goals and Work Habits Survey for Cluster #3 Participants ($N = 8$)

Participant	Empowering Gifted Behavior Scale Subject Area Teachers Completing Scale				Mean	EB	DB	N	GWHS Score
Phoebe	M	E		SC	45.3	10	1		81
John	M	E	SS	SC	41.3	1	3	7	91
Eric	M	E	SS	SC	44.0	3		8	99
Emily	M	E		SC	44.3	8		3	102
Devon	M	E	SS	SC	47.0	7	1	3	103
Fred	M	E		SC	48.7	5	3	3	109
Mary	M	E		SC	45.7	8		3	110
Annie	M	E	SS	SC	48.5	8	3		135

Note. The range of possible scores on the Empowering Gifted Behavior Scale was 11-77. The Mean was 44.5 (SD = 2.46). M = Mathematics; E = English; SS = Social Studies; SC = Science; EB = Enabling Behavior; DB = Disabling Behavior; N = Neutral (4) rating; GWHS = Goals and Work Habits Survey

The three participants who had the highest ratings, Kieran (49.8), Fred (48.7), and Annie (48.5), had total scores which were 2 SDs above the mean. While all three had more enabling behaviors, their teachers perceived that they had the following disabling behaviors from the statements on the EGB Scale:

3. Makes desires into demands on self (I'd *like* to get an A = I must get an A)
6. Embarrassed to be average in an important activity (academics, athletics, leadership)
8. Insistent (even compulsive) about neatness, completeness of work

Kieran, Annie, and Fred all had high Personal Standards and Concern over Mistakes scores on the Goals and Work Habits Survey. Kieran, however, had lower Parental Expectations and Parental Criticism scores than Annie and Fred. Kieran was in the healthy perfectionist cluster, while Annie and Fred were in the dysfunctional perfectionist cluster. Kieran's teachers perceived that he was displaying several disabling perfectionistic behaviors in their classes, yet he appeared to have learned to use healthy methods of coping with his perfectionism. One of his teachers commented, "He began the year a perfectionist . . . . Ended the year learning to laugh a bit more!"

Tracey had the lowest score (40.7) on the EGB Scale. Her teachers perceived her as functioning very well and highly motivated in their classrooms, yet she was having difficulty at the end of the year coping with being overwhelmed by her commitments, grieving the loss of her mother, and peer remarks about her appearance. She was successful in maintaining her "preppie" image with her teachers, while she experienced symptoms of intense anxiety and depression.

Several teachers wrote additional remarks about participants who had more enabling behaviors. Comments by a teacher who had several of these students were typical of the way many of the teachers perceived these students:

> . . . works many *long* hours, however, his work is always well done.
> . . . places an extreme amount of pressure on herself.

An interesting finding was that John, a dysfunctional perfectionist who displayed the most negative underachieving behaviors, received one of the lowest scores. Apparently John was a puzzle to some of his teachers, as one of his teachers explained:

> This form makes me feel that I haven't had John this year. I'm just not aware of his "standing" on many of these. I put 4 when unable to move one direction or the other. Needs to be "prodded" sometimes to get work done or to stop "bugging" others.

Another of John's teachers noted than John was "very capable, but avoids responsibilities." A counselor who had contact with him described him as an immature boy who had troubling dealing with his peers, both in the classroom and in a counseling group.

The results of the Empowering Gifted Behavior Scale indicate that the participants' teachers perceived most of them as being self-confident, mature, able to set goals, and consistent in their work habits. The participants were viewed as enabled rather than disabled by their high standards to do well. Jenkins-Friedman, Bransky, and Murphy (1988) found that students who were identified as "enabled" or "empowered" by the scale were

> more self-accepting, tolerant of their shortcomings, and ready to face the challenges of the world than were the gifted students who were disabled by their standards and expectations. (p. 29)

The teachers viewed the participants more as healthy/normal perfectionists than as dysfunctional/neurotic perfectionists in their classrooms, even though eight of them were in the dysfunctional perfectionist cluster according to the Goals and Work Habits Survey.

Research Question 2

How do male and female gifted adolescents in a rural middle school who have been identified as perfectionistic perceive their perfectionism (specific, generalized, healthy, unhealthy)?

Specific or Generalized

Participants in this study were asked to give their definition of perfectionism; 19 responded with a specific meaning, and only Bob did not have a definition. All of the participants viewed perfectionism, however, from a performance perspective, and their definitions reflected this finding. Over half of the participants agreed with Devon's contention that perfectionism was possible in everything. Of these, four maintained that perfectionism was based on the individual's perception of perfectionism, as in Devon's definition. Even though Bob didn't believe in perfectionism, his explanation was similar to Devon's belief that personal effort was important in how one perceived perfectionism. He stated that he didn't really believe in perfectionism:

> . . . because if something's done the way you want it to be done, then it's the way you want it to be done. And if someone else thinks it's different, then they don't

> think it's done to a completeness. Then that's their opinion, and it's how they feel and how I feel.

Four participants qualified their own perfectionism by stating that while it was possible to be perfectionistic in everything, they were mostly perfectionistic about school, sports, or trying to be perfect for significant adults in their lives. The remaining eight participants thought perfectionism was very specific, and related to each individual's interest. Schoolwork was given as the most specific category of perfectionism, with organization at home, crafts, sports, and computer also mentioned. Eric's response was typical of these participants:

> Perfectionism . . . is to make sure it's done exactly how you want it to be done, with no screw-ups. An example would be like a test maybe, taking a test or homework. For me, it's mostly school-related.

Healthy or Unhealthy Perfectionism

Healthy perfectionism was defined as perfectionistic tendencies that contributed to one's soundness of mind and body. Satisfaction with one's effort that allows room for mistakes is one characteristic of healthy perfectionism. Unhealthy perfectionism was defined as perfectionistic tendencies that fostered mental, emotional, or physical stress in an individual. An inability to feel satisfaction with one's effort, being in a state of anxiety, or constant worry over mistakes characterize unhealthy perfectionism. In this study the participants were asked if perfectionism had been helpful or healthy, and harmful or unhealthy in their lives. All of the participants, except for Bob, stated that perfectionism had been a healthy component and helpful in their lives. Over half the healthy perfectionists mentioned that their perfectionism had helped them to be more organized, to work harder, and to set priorities in their lives. Only four said that perfectionism was helpful in getting good grades.

All of the responses of the dysfunctional perfectionists were performance related. Perfectionism was helpful in doing better on grades or projects, doing well in sports, or having higher standards than others. In Annie's case it was a positive force in her writing, appearance, dance, and getting approval from her father.

A significant finding of this study was the perception of perfectionism as unhealthy or harmful by all of the participants. The majority of the healthy perfectionists stated that their perfectionism had been detrimental at some time during their lives. Harmful effects included: not always enjoying what was happening, time constraints, having a need for control, burn-out, being critical of others, and as Caitlin said, "Sometimes if you haven't got something to the point where you think it's perfect, you feel like you've let yourself down." This drive for perfection for the healthy perfectionists was a struggle for some of them in setting priorities. Several noted the difficulty in choosing between schoolwork and spending time with friends. A common concern was similar to Stephanie's regret:

> . . . sometimes I wish I did a little bit less schoolwork and did more fun things outside and did more things than studying . . . friends.

Half the dysfunctional perfectionists believed they had experienced no unhealthy or harmful effects of perfectionism in their lives. Devon's comments represent the views of this group:

> I don't think that there's any way that perfectionism can hurt. Unless you carried it to an extreme, it wouldn't hurt you. But I don't think I do that, so I don't think it hurts me in any way.

Those who experienced some detrimental effects perceived perfectionism as adding pressure to perform for others, or an annoyance because it was time consuming to be perfectionistic. Annie, however, believed her perfectionism had been very harmful to her. She was extremely sensitive to others' expectations, worked hard to maintain a certain image, yet expressed the pain of her perfectionism:

> Well, like sometimes the people in my class will like, make remarks at me, and that's, I don't know, that's kind of a negative—I kind of—because I like things to be perfect, and I'm a good student and everything. That's kind of the image that I've built up over the years in everybody's mind. And like that's who I am, Annie is a straight A student, and this studious person. And, you know, I want people to know my personal side, you know, like I have a life.

Of all the perfectionists, Annie had the highest total score possible (135) on the Goals and Work Habits Survey, and was considered the most perfectionistic by her "preppie" friends who participated in the study. While most of the other dysfunctional perfectionists did not view perfectionism as harmful, Annie was quite aware of its deleterious consequences, but thought the benefits of being a perfectionist outweighed the negative aspects.

None of the participants who said that perfectionism had been detrimental in their lives connected it with their health. Nervous habits, poor eating habits, sleep problems, or anxiety were not mentioned as possible harmful effects of perfectionism.

Research Question 3

What do male and female gifted perfectionistic adolescents in a rural middle school perceive as influences on and the consequences of their perfectionism? In this study four influences emerged which the participants perceived as influencing the manifestations and the consequences of their perfectionism. These influences were: self, school, family, and community.

Influences

Self

As stated earlier, a majority of the participants in this study stated that perfectionism was a part of their personality. Many became aware at an early age that they wanted things neat, orderly, and organized, whether it was in everything or in a specific area. For some, this became more apparent when they entered school, where these characteristics were valued and rewarded. High grades were affirmations that their perfectionism was a positive personal quality. An examination of the participants' cumulative records indicated that all, except for Phoebe and John, had received numerous awards for academics throughout their school years. For a majority of the healthy perfectionists, however, doing their personal best was more important than the grades. Their motivation was primarily to please themselves first, then others would likewise be pleased. High grades were important to them, but were not the top priority.

For many of the dysfunctional perfectionists, however, their perfectionism led to good grades which led to approval from others they perceived had very high expectations of them. High grades then became the most salient reason for going to school for most of them, because their grades helped to define who they were. Mary's friendships, for

example, were related to her grades. Earning high grades was important, because this ensured the existence of friendships. Lower grades might threaten the friendships as seen when Mary stated, "I don't think I would feel as good, and that—and I didn't belong with some of my friends that got straight As . . . ." High grades meant keeping friends, but increased the pressure to have a perfect report card.

Having a positive reputation in school was of value to all the participants, but for many of the dysfunctional perfectionists, especially those who procrastinated more, it was an additional pressure. It was difficult to maintain the high grades they easily earned in elementary school, especially when they felt pressured to perform by others. A concern over making mistakes guided their decisions and the intensity of their feelings about themselves and others. They doubted their actions more and were much more critical of themselves when they fell short of their high standards.

School—Friends and Peers

Competition to do well in school with friends and peers was perceived as a positive influence by the healthy perfectionists, while the dysfunctional perfectionists viewed it as a form of additional pressure to perform without mistakes. The "preppie" crowd, mentioned by many of the participants, included eleven of the participants. Many were the healthy perfectionists (Barbara, Gretchen, Kate, Stephanie, Rachel, Tracey, Caitlin, and Andy) who viewed the "preppies" as friends who motivated each other to do well. Mary, Annie, and Devon, who were in the dysfunctional perfectionist cluster, were also part of the "preppie" group, but they viewed the competition as another pressure in their lives. Most of the "preppies" mentioned Annie as their most perfectionistic peer; she was generally perceived as either a motivator or a cause of friction among the students. Like Mary, she viewed the "preppies" as important in her life, because they affirmed who she was:

> Well, I really like people who try their hardest at everything that they do, because I don't really see a point in doing things like half-heartedly or like not the best that you can. And I like people who try their hardest at everything, and it's just, it's a good feeling to know that other people like to work hard and like to think like you do.

School—Teachers

The majority of the participants stated that some of their teachers had influenced their perfectionism, either positively or negatively. Only half the healthy perfectionists said this was the case, while seven out of the eight dysfunctional perfectionists noted this influence. Those who believed that some of their teachers played a positive role said these teachers focused on the importance of organization, neatness, and order in their schoolwork. The teachers affirmed an already existing desire for order by these participants. The healthy perfectionists appreciated organizational directives; many stated that teacher messages to be organized had increased when they started Brenan Middle School. Only two healthy perfectionists viewed some of their teachers' influence on their perfectionism in a negative manner.

The majority of the dysfunctional perfectionists had felt pressure to perform perfectly from some of their teachers ever since elementary school. Comments by teachers about slowing down, being neater or more organized, and following directions were found in a majority of the dysfunctional participants' cumulative folders, especially during elementary school. A second grade teacher's notation about Phoebe was representative of these remarks:

> Phoebe is one of the most creative children I have ever seen—she can create something out of scraps—but I do not see the same kind of enthusiasm in her

> school work (written). She prefers to chat—is not on task—hasn't gotten involved in lengthier books yet—does not follow directions—she often has an agenda that is different than mine. What is enough effort for her is not enough for me. Phoebe is doing well in math. She sees all kinds of patterns.

This perceived teacher criticism and very high expectations continued into middle school for most of the dysfunctional perfectionists. Comments such as "we are expected to do *the* best" and "the teacher's goal is for everyone to get 100" were interpreted not as a challenge to do well, but as a burden to be perfect. In turn, these participants worked very hard to please their teachers. An interesting finding was that while the dysfunctional perfectionists said that some of their teachers were too "picky" in their demands, half stated that they had teachers who made attempts to get them to relax more, to not be so serious, or to be able to accept making mistakes. Both the healthy and dysfunctional perfectionists mentioned two teachers in particular who were concerned about their perfectionistic behaviors. One teacher made a familiar statement, "It's good to learn from your mistakes."

Family

An interesting finding emerged about how the participants who were selected for interviews perceived perfectionistic tendencies in their parents and families, and the influence this had on their own perfectionism. Fifteen students (75% of the participants) stated that their parents had perfectionistic tendencies, while five (three from Cluster #2—Jim, Kieran, Caitlin; two from Cluster #3—Phoebe, Fred) indicated that neither of their parents were perfectionistic. Females ($N = 8$) more than males ($N = 2$) perceived only one parent as being perfectionistic. An equal number of females ($N = 4$) and males ($N = 1$) regarded either their mother or their father as perfectionistic. This finding reversed for the five participants who regarded both parents as possessing perfectionistic tendencies—four were males.

The healthy perfectionists viewed their parents' perfectionistic tendencies in a positive light, except for the twins Rachel and Stephanie. Both stated that their parents, especially their mother, were even more concerned about neatness at home than they were. All of the healthy perfectionists, however, perceived their parents as having a major and positive effect on their perfectionism, because their parents encouraged them to do their "personal best." Caitlin, whose parents were divorced, stated her mother's influence was greater than her father's, because her mother empathized with her when she made mistakes. Her mother's accepting messages were stronger than any negative comments her father might make. Even Bob, who stated that he really didn't believe in perfectionism, noted that his parents encouraged him to do well in his high ability areas, especially math.

None of the healthy perfectionists related any negative criticism from their parents about schoolwork. Statements such as "Everybody makes mistakes" or "Learn from your mistakes" were typical comments these healthy perfectionists heard at home. They viewed these comments as helpful during frustrating times or when their parents thought they were becoming too perfectionistic about schoolwork or other activities. All of the healthy perfectionists, except for Rachel, Stephanie, and Bob, stated that they were more perfectionistic than their parents. Their parents reinforced their healthy perfectionism by giving them permission to make mistakes and urging them to do their "personal best." Parental expectations to do well were positively received by all the healthy perfectionists.

Of the dysfunctional perfectionists, only Phoebe and Fred did not believe that their parents had perfectionistic tendencies. Those who did, however, regarded their parents' perfectionism negatively, and perceived their parents as being more perfectionistic than they were. They perceived their parent or parents' high standards as unattainable at times. Since the students had earned high grades in elementary school, they were expected to perform as

well in middle school. Parental criticism of their performance was painful for them. None of the dysfunctional perfectionists heard statements from their parents like the healthy perfectionists did to do their personal best. They perceived only parental criticism, and urgings to do "*the* best."

While the healthy perfectionists worked primarily to please themselves, the dysfunctional perfectionists worked hard to please others first—parents, relatives, teachers, and friends. A statement such as, "I would always try to get straight As so they would continue to be proud of me" was typical of remarks the dysfunctional perfectionists gave about why they worked so hard. They, too, had high standards, but thought their parents' expectations were higher. Their frustration with less than perfect performance was intense, and it was teachers and peers who encouraged most of them to accept less than the best, not their parents. When they did, they felt shame and guilt for not trying hard enough or for disappointing others and themselves.

The siblings who participated in the study all indicated that their other sibling was perfectionistic. The identical twins (Barbara and Gretchen, Stephanie and Rachel) all indicated that their twin was as perfectionistic or perhaps even more perfectionistic. Sometimes competitiveness was the result, but it was usually regarded as a positive motivator to do well. Phoebe and Emily viewed each other's perfectionistic tendencies negatively, especially since Phoebe's creative energy was directed toward activities that didn't interest Emily. It was difficult for them to interact, since each other's perfectionism annoyed the other intensely. None of the other participants said their siblings had perfectionistic tendencies, except for Devon who suggested that his brother might be perfectionistic too, since Devon thought of his brother as exactly like himself. Although Jim and Andy did not think their older brothers were perfectionistic, they both regarded their brothers' competitive natures, especially in sports, as influencing their perfectionism. Both viewed being competitive and wanting to win as positive aspects of being perfectionistic.

The majority of the healthy perfectionists had other relatives who had perfectionistic tendencies, and all had different manifestations of perfectionism. Barbara and Gretchen both stated that their grandmother was perfectionistic because, as Gretchen said, "She always, like, tries to put her best foot forward, even if it's something that doesn't matter, like, doesn't count or isn't going to be seen." Kieran and Tracey viewed their grandfathers as somewhat perfectionistic. Tracey believed her grandfather was the "perfect host" when she visited, and Kieran regarded his grandfather's repeated comment that, "I may not always be right, but I'm never wrong," as leaning toward perfectionism. Caitlin stated that her aunt was the most organized person she knew, because everything had to be in a certain place. None of the dysfunctional perfectionists indicated relatives other than their parents or a sibling who manifested perfectionistic behaviors.

Community

When asked who in the community they admired, 75% of the participants indicated there was no one they could name. Of the five who did, three stated women (a nun, minister, older cousin), and two felt their pastor and youth leader were admirable. None of the five believed these people were either perfectionistic or had influenced their own perfectionistic attitudes or behaviors. The remaining fifteen could not name anyone in the community who might have influenced them in any way.

Consequences

The consequences of being perfectionistic affected the participants in this study in three overlapping areas—interpersonal relationships, school life, and the future.

Interpersonal Relationships

The interpersonal relationships of the participants were affected by how their perfectionism was manifested and perceived, by themselves and others. The healthy perfectionists believed their perfectionism was primarily a positive force that motivated them to work hard. Their parents encouraged them to do their "personal best" in whatever they attempted. The healthy perfectionists perceived their perfectionism as helping to maintain a positive relationship with their parents, because their parents also valued working hard and mistakes were acceptable during that process. Their perspective of their perfectionism included a recognition of how sometimes it could be harmful or unhealthy for them. Some worried too much or wanted more leisure time for relaxation, but all thought perfectionism was a positive aspect in their lives, especially in their relationships with their parents.

The interpersonal relationships of the dysfunctional perfectionists, on the other hand, were more tenuous. Their relationships with their parents and families were not as stable as those of the healthy perfectionists, because of their intense concerns about parental expectations and criticism. They didn't want to fail because they would disappoint their parents and then be subjected to critical comments. For most of them, their personal value was equated with their performance, and although only half viewed perfectionism as harmful in their lives, all the dysfunctional perfectionists, except for Fred, expressed great levels of stress in their relationships at home.

A majority of the participants believed that their perfectionism had little or minimal effect on their relationships with their classmates. Some thought it irritated relationships with friends, especially those in the "preppie" crowd. Most viewed it as positive, however, because it brought accolades for being a hard worker, and classmates sought their help and advice. Their perfectionism resulted in a positive reputation within the school community where industriousness was admired and valued. All of the participants had many notations in their cumulative folders from teachers that they were a "pleasure to have in class" and were liked by their peers.

Only a few stated that they were teased by their peers about their perfectionism; most comments were friendly bantering. For Annie, her pain of being teased was evident when she remarked,

> Yeah, like they, you know, I always have to be on top of the class because that's where they expect me to be. But I'm not always the top of the class. And, you know, if maybe I don't get as high as a grade as someone else does, then they'll say, "Oh, Annie, you got beaten."

School

Among the significant findings in this study were the consequences the participants experienced in school as a result of their perfectionistic behaviors. Two areas emerged from the interviews with all the participants. The first was the role the perfectionistic participants believed they were asked to perform in their classrooms. Because they were organized and conscientious, a majority of the participants thought that they carried the responsibility of making group work, especially cooperative learning mixed ability groups, successful. A

majority of them said that they did not like these groups because they ended up being the leader and doing most of the work, in order to get a good grade. Frustration and anger with group grades was common and intense, especially for those who had a strong sense of fairness. They did not like being held accountable for others' work or lack of it. Tracey's remark was representative:

> . . . when I'm working with people who like to goof around or something like that, or they don't think deep enough for questions, or they don't work hard enough or they're not perfectionists, or at least try their best. It gets on my nerves. It really turns me off, because I'm just like, this is school! I mean, do your best. I mean, this is going to be my grade, too.

Since working hard was the highest value to them, most of them found it very difficult to deal with the stress of working with others who didn't care, and resented doing others' work, explaining, or reviewing material. Yet their need for control, order, and neatness would not let them fail. They just worked harder to complete group assignments, and complained to each other and sometimes their parents.

Asked if they preferred working on a project individually or in a group, five of the participants stated that they preferred working by themselves. Fifteen or 75% of the participants said it depended on the composition of the group. Motivation to have neat work and get a high grade was the issue that concerned them. Kieran's statement was typical of these participants, when he stated,

> I guess it really depends on who would be in the group, because I don't like working with people who don't do any work and put all the work on my shoulders. I feel that's a waste of my time.

All of these participants preferred working with others of similar ability, because they thought that these group members would be more responsible, dependable, and would "pull their own weight." Less than half the participants said that they had opportunities to work with others of similar abilities in small groups. There were more opportunities in the accelerated courses, but they would have preferred more.

The second consequence that evolved during this study was the level of challenge the participants experienced throughout their school years. Sixteen or 80% of the participants stated that they really had not been challenged in school, except for their accelerated courses in middle school. They preferred accelerated courses, because they were stimulated by the content, had the opportunity to work with others who had similar abilities, and liked the faster pace. Several said the accelerated classes were still too easy for them, and several expressed the desire to have accelerated courses start in sixth grade.

Descriptors like "redundant," "pretty easy," "really boring," and "not challenging" were used to describe most of their school curricular experiences from elementary through middle school. Only Jim, Bob, and Fred remarked that the work was just right for them; and Annie said that the information she could obtain in school was fascinating and endless for her.

Almost all the participants stated that they put minimal intellectual effort into their schoolwork compared to what they thought they were capable of doing. There was an abundance of assignments to do; some were fun and gave them opportunities to be creative, but most were fairly easy. A majority of the participants spent a great deal of time making their assignments perfect. When asked a hypothetical question about how he might feel if

he went all the way through school with straight As, but didn't have to work because it wasn't a challenge, Scott responded,

> I'd feel good because I got straight As, but not that good because I really wasn't performing up to what I could. Like, if I didn't get into any accelerated classes, I wouldn't be able to get like college credits or whatever.

A consequence of their perfectionism in school was that the participants were expected, by themselves or others, to get good grades even though they thought the work wasn't that challenging. They had come to expect that they would get high grades for making easy work perfect.

Future

A third consequence of the participants' perfectionism was their focus on the future. The future was important for the participants in this study, and high grades were a necessary component to attain their goals. All of the participants had high aspirations with plans to attend college, except for John who was determined to be a professional basketball player. All of the participants envisioned themselves in professional careers. Their futures were paramount in their lives, and their energies in school were directed toward obtaining high grades, even when they thought the work was not challenging. The dysfunctional perfectionists had future dreams that were similar to the healthy perfectionists. Career options for both groups included such professions as: lawyer, architect, linguistic anthropologist, historian, musician, veterinarian, pediatrician, math teacher, and medical scientist. Most of the healthy perfectionists mentioned wanting families in their futures, while only two of the dysfunctional perfectionists considered this as a goal.

Challenge for the participants occurred through several avenues. In addition to the accelerated courses, participants noted they found challenge in activities in extracurricular activities such as the Brown Bag Philosophy Club, preparing for the SATs, participating in the Odyssey of the Mind, Olympics of the Visual Arts, school plays, and sports. All of the participants, except for Fred, were involved in community activities such as: Boy or Girl Scouts, Boys Club, 4-H, community sports, library aides, or fife and drum corps. Other areas of challenge included lessons in musical instruments, sports, martial arts, and dance. A majority of the participants attended church and some were very active in church youth activities, and used their talents there as well. While they found challenge in these activities, all of the participants said that school usually came first in their priorities, even though it didn't have as much challenge as they wanted. The importance of the connection between doing well in school and their futures was emphasized both at home and at school.

Gender Roles

A significant finding in this study was the participants' perceptions of gender roles in their lives. Participants were asked if anyone, whether at home, school, or community, expected them to behave in a certain way because they were male or female. Nineteen of the participants stated that no one in their communities had this expectation of them. Tracey was the exception, and her perception was that expectations were not focused directly at her, but to females in general to dress or act a certain way. Sixteen of the participants said this expectation was not experienced at home. Of the four who had, three were females who had heard admonitions to "act like a girl," "look more feminine," and "be ladylike." Only one male, Scott, was exhorted by his parents to set an example for his younger brothers.

More than half of the participants did not perceive having gender role expectations in school. Of those who did, only one stated that teachers admonished boys to behave better during class or assemblies. The remainder of the participants viewed the expectations as peer related. As one participant remarked,

> I don't think it's the teachers, but I think the boys expect the girls to do more—like get better grades.

Boys were expected to be stronger and do better in sports, while girls were not supposed to be interested in them, but do better academically. One of the participants noted with frustration that her friends didn't understand her fascination with sports statistics:

> . . . because they're all into cheerleading. I'm like, what's a group of girls sitting around cheering for guys? I mean, it's guys! I mean, I sit there but don't say that. And they're just like, you're into baseball? And I'm always talking about statistics with sports, with guys about like batting averages and stuff like that. And I know all the basketball—everything like that. And then they sit there and they think, like it's the most boring thing. And they just say, you're not supposed to be interested in that.

Most of the teasing about gender expectations was directed at the boys. Because there were more girls than boys in many of the classes, smart boys were viewed as heroic if they beat a girl on a test. Teasing occurred if a boy lost to a girl in sports. Comments like the following from a male indicated the level of teasing and understanding about gender roles by the participants:

> Like my friends, they like sort of make fun of me sometimes because I'm smart, and like at this age level, girls are known to be smarter than boys.

The "preppies" who had "appearance perfectionism" that was dependent on how one looked, did not view this perfectionistic tendency as a gender issue, but as a matter of neatness and order. This applied to both males and females. The exception was the female participants who were admonished to look more feminine by other boys or their fathers. When asked what magazines they read, most of the female participants listed the female teen magazines *Seventeen* and *Teen*, while the male participants listed sports magazines. Half of the female participants listed other magazines such as *National Geographic, Art and Man, Time,* and *Current Science* in addition to reading teen magazines.

Gender expectations were not major concerns for the majority of the participants. They did not perceive parents, teachers, or community members making demands of them because of their gender. If gender expectations were made at all, it was by their peers to either perform well in sports or academics.

CHAPTER 4: Summary and Conclusions

The purpose of this study was to examine the characteristics of perfectionistic gifted male and female adolescents, how they perceive their perfectionism, and the consequences of their perfectionistic behaviors in the context of their rural school experience. The study was based on two theoretical propositions: first, that perfectionism, as a characteristic of many gifted adolescents, may affect their social and emotional behaviors (Hollingworth, 1926); second, the manifestations of perfectionism can be normal or neurotic (Hamachek, 1978). The findings of this study sought to test or confirm these theories, and to add to the body of knowledge about perfectionism in gifted adolescents.

The first problem addressed was, do many gifted male and female adolescents in a rural middle school possess perfectionistic tendencies? The results of this study indicate this to be the case. Of the gifted adolescents ($N = 112$) in seventh and eighth grades at Brenan Middle School who took the Goals and Work Habits Survey, 87.5% ($N = 98$) were identified as perfectionists versus 12.5% ($N = 14$) who were nonperfectionists. This high percentage of gifted adolescents in a rural middle school supports previous research cited in the literature (Hollingworth, 1926; Janos & Robinson, 1985; Lovecky, 1992; Orange, 1997; Roedell, 1984; Roeper, 1982; Silverman, 1993) that perfectionism is a characteristic that many gifted adolescents possess.

The second problem to be addressed was the manifestation of perfectionism according to Hamachek's (1978) theory. The results of this study confirm his multidimensional theory of perfectionism. Seen on a continuum, perfectionism can be viewed as healthy/normal or dysfunctional/neurotic or as enabling or disabling (Bransky, et al, 1987). The triangulation of the data in this study support this continuum of behaviors and attitudes. Participants who were identified as gifted perfectionists not only had scores on the Goals and Work Habits Survey that reflected this range, but also multiple sources of evidence and information confirm the existence of a continuum of perfectionistic behaviors and attitudes.

Information from the case study database supports Hamachek's descriptions of the healthy/normal perfectionists and the dysfunctional/neurotic perfectionists. The healthy perfectionists possessed an intense need for order and organization, displayed self-acceptance of mistakes, and had positive role models who emphasized doing one's "personal best." The dysfunctional perfectionists had extremely high standards, exhibited a constant need for approval, and had an unremitting state of anxiety. Most of the dysfunctional perfectionists appeared to exist in an emotional environment of conditional positive approval. Their performance equaled their perceptions of self. They perceived having few positive role models on how to deal with failure, and they lacked effective coping strategies when they did make mistakes. Their behaviors substantiate Hamachek's (1978) descriptions about dysfunctional perfectionists, and Mendaglio's (1994) concerns about some gifted children's intense negative reaction to feedback because of "unrealistic views of what it means to be gifted; sensitivity; high expectations of self and others; and self-criticism" (p. 24). Mendaglio found that gifted children's high level of self-criticism can lead to a chronic state of negative self-scrutiny. The behaviors and attitudes of the dysfunctional perfectionists in this study validate these assertions.

The data on the participants who were identified as either healthy or dysfunctional perfectionists corroborate Frost et al. (1990) and Parker's (1997) research that specific factors relate to each type of perfectionism. Nonperfectionists had lower scores on organization, personal standards, and perceived parental expectations than those who were

healthy or dysfunctional perfectionists. Healthy perfectionists had intense desires for order and organization in their lives, yet were able to accept their mistakes. They had confidence in their choices and enjoyed high parental expectations. While Frost et al. stated that order and organization is not a core component of perfectionism, in this study it was a central theme in the lives of the healthy perfectionists.

The dysfunctional perfectionists lived in a state of anxiety about making errors. They never believed that they could reach their own high standards, in part because they perceived that others were critical of their efforts. The dysfunctional perfectionists never seemed to know what was "good enough." Their goals were similar to those Barrow and Moore (1983) described as "perfectionistic thinkers." Goals were necessities, and standards were often unrealistic and rigid. The depressive behaviors exhibited by the dysfunctional perfectionists corroborate the findings of Hewitt and Flett (1993) that there is an association between anxiety and self-oriented perfectionism. Frost et al. (1990) noted that concern over mistakes was the "dimension which was most closely related to symptoms of psychopathology" (p. 465).

The findings in this study, while corroborating Parker's (1997) conclusions about the types of perfectionism, differ in the percentages from those in Parker's study. In this study, 12.5% of the respondents on the Goals and Work Habits Survey (Schuler, 1994) were considered nonperfectionists, while 32.7% had this classification in Parker's study. Healthy perfectionists in this study accounted for 58.0% of the respondents; in Parker's study 41.8% were in Cluster #2. The dysfunctional perfectionists composed 29.5% of the respondents, while 25.6% of those in Parker's study were in Cluster #3. The difference in these figures may be due to the difference in samples in the studies. Parker's (1997) sample was composed of sixth grade students who had scored at or above the 99th percentile in mathematics or verbal skills or both on the Secondary School Admissions Test (SSAT) as part of a national talent search conducted by the Center for Talented Youth. In the present study, seventh and eighth grade students who were participating in accelerated courses were considered gifted students. Not all Goals and Work Habits Survey respondents in this study took the SSAT, and percentile scores were not available for those respondents who had.

Reasons for perfectionism as suggested in the literature were also found in this study. Interviews with the participants support claims by Bellamy (1993), Dabrowski (1964), and Silverman (1990) that perfectionism may be inborn for some people, and that some perfectionists may have perfectionistic parents (Rowell, 1986). Most of the healthy and dysfunctional perfectionists perceived their need for perfection as a personality characteristic, and viewed their behaviors as separate from others' perfectionism. Most of the healthy perfectionists had early memories of perfectionistic tendencies that revolved around being organized or neat, while the dysfunctional perfectionists had memories connected with making mistakes. The majority of both groups had at least one parent who was perfectionistic; how these perfectionistic tendencies were viewed was different for each group. Most of the healthy perfectionists perceived their parents' perfectionism as a positive trait, while the dysfunctional perfectionists viewed it negatively. The majority of the participants in both groups believed their perfectionism to be inborn, yet acknowledged the impact, either affirmatively or negatively, of their parents' perfectionistic traits.

Parker (1998) found that first born children are more likely to be classified as gifted than middle or youngest children. Other researchers (Leman, 1985; Smith, 1990) have concluded that only children and first born children have more perfectionistic tendencies. Parker discovered that youngest children were disproportionately nonperfectionists and least likely to be dysfunctional perfectionists, while only children were disproportionately likely to be healthy perfectionists. In this study, of the total students ($N = 112$) in

accelerated courses in seventh and eighth grades who took the Goals and Work Habits Survey, $N = 47$ were first born, $N = 4$ were only children, $N = 25$ were a middle child, and $N = 36$ were the youngest in their families. Almost half ($N = 51$) were either first born or only children who had been identified as gifted. This validates the findings of Parker, Leman, and Smith about first borns being perfectionistic.

These findings also support Parker's (1998) claims about first born more likely to be identified as gifted than middle or younger children, and that youngest children are least likely to be dysfunctional perfectionists. In other words, the youngest are more likely to be healthy perfectionists or nonperfectionists. The results of the present study do not confirm Parker's statements that the youngest were disproportionately nonperfectionists. In this study the opposite was the case. There were almost twice as many youngest children in the healthy perfectionist group as in the dysfunctional perfectionist group, and four times the number of the nonperfectionists. The findings indicate that the oldest children were disproportionately represented in the healthy perfectionist cluster, twice as often as those in the dysfunctional perfectionist cluster, and almost four times the number in the nonperfectionist cluster. The oldest, middle, and youngest who were identified as gifted in this study were more likely to be healthy perfectionists, while the only children were equally distributed among all three clusters. There were not enough only children in the present study to confirm or dispute the assertions about only children by Parker, Leman, or Smith.

Buescher (1987) and Csikszentmihalyi et al. (1993) stated that the acceptance of one's abilities was an important task of gifted young people. In this study the females accepted their high abilities, more so than the males. The healthy perfectionists were more assured of their abilities than the dysfunctional perfectionists, and the male dysfunctional perfectionists who were having problems in some classes, struggled with the ownership of their abilities. They had difficulty understanding why they weren't as smart as they had been in elementary school, and had trouble "owning" their abilities. All of the participants, except for Bob, said that they had perfectionistic tendencies. The healthy perfectionists admitted the helpful and harmful aspects in their lives, while almost all the dysfunctional perfectionists denied any detrimental effects.

Messages from the media to look perfect have also been stated as a possible reason for perfectionism (Adderholdt-Elliott, 1991). Many of the participants, both male and female, were concerned about their appearance, but attributed this to their desire to be neat. Dress style was important to over half of the participants, especially the "preppie" group. Although only a few of the female participants regularly read teen magazines, peer pressure was more of an influence on choice of dress style. The participants in this study were more concerned about their performance; appearance was important, but it was secondary to earning high grades.

Another societal contributor to the presence of perfectionism found in this study is similar to Barrow and Moore's (1983) contention that perfectionism may develop as a result of an educational system's emphasis on perfection and achievement. The Eastern School District has a long standing reputation for providing an excellent education, and the community expects the educators to continue this tradition. The majority of the participants in this study noted the influence of both teachers and peers on their perfectionism. The healthy perfectionists appreciated their teachers' and peers' perfectionistic behaviors, while the dysfunctional perfectionists viewed them as providing additional pressure to perform perfectly.

The influence of a dysfunctional family as a reason for perfectionism (Ackerman, 1989; Smith, 1990) was found in this study. The majority of the dysfunctional perfectionists stated that they had family problems and difficult relationships with one or

both parents, or sibling. Because their perception of perfectionism was making no mistakes, they viewed some family members, either a parent or sibling, as exacerbating their beliefs that failure was horrible.

Performance perfectionism was the most prevalent type of perfectionism found in the participants. Like the subjects in the research conducted by Bransky (1989), the participants in this study viewed themselves as hard workers and primarily responsible for their academic success. The healthy perfectionists worked harder when mistakes were made, while the dysfunctional perfectionists offered more excuses and/or had more self-blame when they weren't successful. Perfectionists in both groups who had high academic standards appeared to have a need to excel in other areas of their lives (e.g., extracurricular activities, sports), as Bransky (1989) found in her research.

Moralistic, identity, and interpersonal perfectionism are apparent in this study, but not to the degree or intensity as performance perfectionism. These findings confirm the various categories or paths that Elliott and Meltsner (1991) discussed. Similarly, the six overlapping behaviors and attitudes that Hamachek (1978) associated with perfectionism were detected in this study. Their manifestations, however, vary in intensity and duration among the participants. The dysfunctional perfectionists did, as Hamachek suggested, possess these behaviors and thoughts for longer periods of time and with greater depth. The existence of depressive symptoms, for example, was more prevalent and more intense for them.

Other perfectionistic behavioral traits mentioned in the literature are found in this study, especially among the dysfunctional perfectionists. They include: mood swings (Adderholdt-Elliott, 1987), underachievement (Burns, 1980; Whitmore, 1980), playing the "number game" (Friedman & Rosenman, 1974), and pining over the past (Elliott & Meltsner, 1991; Freeman & DeWolf, 1989). A number of the participants demonstrated behaviors that would indicate some psychological maladjustment might be occurring. In addition to depressive symptoms, the possibility of several participants having symptoms of eating disorders became apparent during the interview process. Another participant who demonstrated a neutral or nonfeeling state may be experiencing extreme psychological distress.

The coping strategies of the participants in this study support the findings of Tomchin, Callahan, Sowa, and May (1996) who researched coping strategies and self-concept in adolescents. The most frequently used coping strategy that they found, working hard and achieving, was the primary strategy used by the majority of the participants in this study. The healthy perfectionists used additional achievement adjustment strategies (seeking social support, social action) as well as process adjustment strategies (focusing on problem solving). They used strategies to balance their own and others' expectations. Tomchin et al. (1996) found that these coping strategies are related with positive emotional and social adjustment. The dysfunctional perfectionists, on the other hand, used more detrimental strategies (striking out, blaming, procrastination) to cope with their anxieties.

Additional information was gathered about perfectionistic tendencies in gifted adolescent females and males. In this study, more males than females were nonperfectionists, while there were more females than males in the healthy/normal perfectionistic cluster. There were similar numbers for male and female participants in the dysfunctional/neurotic cluster. The female participants in this study also indicated an increase in their perfectionism from elementary school to middle school. While both the males and females noted their performance perfectionism, more females than males indicated an increase in appearance and interpersonal perfectionism. These findings

substantiate conclusions (Bellamy, 1993; Kline & Short, 1991a; Rodenstein, Pfleger, & Colangelo, 1977) that perfectionism increases in gifted females during junior high school.

The interview responses of the participants support the recognition of several issues that gifted adolescents face (Buescher, 1987). In this study, Dissonance (recurrent tension between my performance and my own expectations) and Others' Expectations (being pushed by others' expectations, being pulled by my own needs) are the salient issues that the participants faced. The pressure for success, especially for the dysfunctional perfectionists, is similar to other research studies (Baker, 1996; Higham & Buescher, 1987; Kaiser & Berndt, 1985; Leroux, 1988). Some of the participants are dealing with several "predictable crises" (Blackburn & Erickson, 1986) of gifted adolescents, including underachievement and "paralyzed perfectionism."

Results in this study have similarities and differences with several conclusions from a recent study by Callahan et al. (1994). The healthy perfectionistic female adolescents in this study stated that their parents encouraged them to do their "personal best." Like the subjects in the study by Callahan et al., most had only superficially internalized this intrinsic motivation, because grades were still important to them. The female dysfunctional perfectionists were also highly concerned about their grades, but their motivation was strictly external—they wanted to please others first.

Another similarity between this and the Callahan et al. (1994) study is the "Superwoman Syndrome." A review of the female adolescents' activities confirms this overextension of involvement in extracurricular activities; their participation outnumbered the males two to one. The average number for the females was eight extracurricular activities. All of the female participants in this study found challenge in these activities; for most they were an antidote to what they perceived as not very challenging school work or as a means to express their creativity.

Fear of success by the female participants is not a finding in this study. Similar to the findings of Callahan et al. (1994), the female participants in this study did not suppress their abilities, but all, except for Phoebe, demonstrated conforming behaviors, especially if they were members of the "preppie" group. The absence of fear of success may have been due to the strong role models by their mothers and teachers. All of the female participants' mothers had college educations, and the teachers most often admired by the female participants were their female math teachers.

Unlike the subjects in Callahan et al. (1994) study, the female participants in this study did not hide their intellectual abilities. The work ethic of the community, the school, and their families reinforced their belief that it was all right to be female and smart. The "preppie" group, which was composed of very bright adolescents who worked hard to earn good grades, acted either as a protector or inhibitor for many of the female adolescents. While it provided safety in acknowledging one's high abilities, it promoted a fear of failure for some of the female dysfunctional perfectionists. This peer-related stress to conform to the "preppie" perfectionistic work ethic supports Ford's (1989) belief that gifted adolescents face pressure to conform to the school culture. In this study the "preppie" group was the primary school culture for many of the perfectionists. The female dysfunctional perfectionists were overly concerned about mistakes, intensely afraid of public embarrassment, and had continual self-doubts about their work and performance. Similar to several subjects in the research by Callahan et al., the female dysfunctional perfectionists in this study had to be "the best" and were intensely competitive with their peers.

A major difference between this study and that of Callahan et al. (1994) is the attribution of success. The female participants in this study attributed their high grades and

awards to their high abilities and their hard work. They acknowledged their high abilities, since all had met the criteria for taking accelerated courses at Brenan Middle School. It was a combination of using their abilities and working hard that made them successful, even for the dysfunctional perfectionists who stated they were "probably successful."

A final contrast between the two studies are the expectations of the future. Callahan et al. (1994) found their subjects had unreal expectations of the future and a lack of planning for the future. The female participants in this study were the opposite. The future was extremely important to them and they had specific educational goals (college) for their future, and almost all had definite careers in mind. All of the female participants knew that taking the accelerated courses was the gateway to advanced courses in high school and going to a good college. This was reinforced by their teachers for both the females and the males.

The findings about the gifted male perfectionists in this study confirm several previous research conclusions. The males in this study, especially those who were dysfunctional perfectionists, were similar to those in studies by Baker (1996) and Fimian (1988) who experienced high levels of anxiety, boredom, and a lower quality of school experiences. Teasing about being smart or being perfectionistic was more common for the males than the females in this study. They also had increased feelings of worry and depression. The results in this study confirm Ludwig and Cullinan's (1984) conclusion that gifted males had more behavioral problems than gifted females. The cumulative school records indicated that males in this study had more negative teacher comments about behavior than gifted females. This was especially true for dysfunctional male perfectionists. Like subjects in Loeb and Jay's (1987) study, they were urged to be less individualistic and to conform to teacher demands and regulations.

Living in a rural environment did not have a major impact on most of the participants in this study. The majority did not feel isolated where they lived, participated in many extracurricular activities and sports, and enjoyed travel and cultural experiences with their families. These experiences were similar to findings by McIntire (1994) that rural gifted students do have access to cultural and athletic activities. The participants in this study experienced time like the subjects in Cross and Stewart's (1995) study—it was future oriented. Only three participants believed that living in a rural environment had some negative effect on them. The three Korean born gifted female adolescents experienced racism, especially during their elementary school years. The parent of one of the girls attributed racism to two factors: the lack of diversity in the rural communities within the district, and little multicultural education in the schools.

The participants in this study had mixed reactions to their rural education. Like the participants in The Rural Attitude Survey (Herzog & Pittman, 1995), they perceived their schools to have friendly atmospheres, and most enjoyed coming to school because it was something to do and a place to see their friends. Only a few said they came to school because they loved to learn. The participants liked their teachers, administrators, and school staff, and viewed them as caring and supportive.

A finding of this study substantiates concerns (Kearney, 1991a, 1991b; Newland, 1976; Spicker, Southern, & Davis, 1987; Yoder, 1985) about meeting the special educational and psychosocial needs of rural gifted students. The majority of the participants in this study stated that they did not believe they were intellectually challenged in their classes, with the exception of their accelerated courses. Most stated that while they were working hard to perfect assignments, tests, or projects, they were putting minimal intellectual effort into their work and receiving high grades in return. They were accustomed to success and had come to believe, "that which is easy is exemplary" (Tomlinson, 1994b, p. 259). This was equally

true for the dysfunctional perfectionists who also received high grades. Their behaviors and attitudes support the conclusion by Bransky (1989) that

> . . . while a high level of perfectionism may be accompanied by increased levels of anxiety, decreased risk-taking, greater excuse-making, and procrastination, it still may result in highly-rewarded scholastic performance—at least at the junior high level. (p. 89)

Earning high grades was the goal for all the participants, but many experienced anxiety because of the lack of challenge, confirming the contentions of Cross and Stewart (1995) and Sicola (1990) that rural gifted adolescents also experience stress related to academic concerns. The findings of this study support research (Feldhusen & Kroll, 1985; Ford, 1989; Reis & Purcell, 1993) that insufficient challenge in the classroom results in boredom for gifted students.

The gifted perfectionistic adolescents in this study found challenge primarily through extracurricular activities, a strategy found by Plucker and McIntire (1996) in a study that examined academic survivability in gifted middle school students. The "preppies" interacted with each other, providing social and intellectual support. Only two participants mentioned using the strategy of focused curricular involvement, and one noted interacting with a teacher privately as a way to obtain intellectual stimulation.

An important finding in the present study was the difference in perceptions between teachers and gifted adolescents about perfectionistic behaviors. This may be due to the perfectionistic gifted adolescents who are "pleasers," and who work very hard at not displaying any flaws. This may make it difficult for parents, teachers, or counselors to detect mild perfectionistic distress. Many of the participants appeared to be "model students" and their perfectionistic behaviors may be interpreted as good school adjustment, especially since most were earning high grades. Some of the teachers' inabilities to distinguish between healthy and dysfunctional behaviors is a concern, especially when students who are gifted act on their perfectionism related distress. Teachers and peers are usually stunned when "model students" commit suicide or murder, and Goleman (1996) cited recent studies that indicate there is a higher suicide risk for perfectionists.

Few of the participants had contact with the school counselors, and most perceived the school counselors as only working with students who had problems. There were no counseling programs specifically for gifted students at Brenan Middle School.

While most of the participants in this study displayed the core attributes (Understanding, Sentient, Achievement, Endurance, Dominance, Exhibition) of talented teens discussed by Csikszentmihalyi et al. (1993), there was one major difference between the healthy and dysfunctional perfectionists. While the dysfunctional perfectionists demonstrated Abasement (questioning their own worth or judgment), the healthy perfectionists did not. Their intense concern over mistakes led the dysfunctional perfectionists to constantly doubt their actions and their worth. Like the subjects in the study by Csikszentmihalyi et al., the participants who had emotional support and encouragement of challenge from their families were better able to overcome any negative learning experiences at school. They understood the realities of their perfectionistic tendencies, and accepted the helpful and harmful consequences as long as they were encouraged to do their "personal best." For the dysfunctional perfectionists, the perceived expectations of self and others, especially their families, to perform without failure resulted in harmful and sometimes serious outcomes.

A major difference in the literature on perfectionism and this study is the perception of perfectionism. Most of the writings indicate that perfectionism is a negative trait. Recent popular books (Alvino, 1995; Elliott-Meltsner, 1991; Mallinger & DeWyze, 1992; Smith, 1990) emphasize the negative aspects and complications of perfectionism. Books for gifted children and adolescents and their families (Adderholdt-Elliott, 1987; Galbraith & Delisle, 1996; Walker, 1991) discuss perfectionism from a negative viewpoint. The findings of this study suggest that perfectionism exists on a continuum with behaviors, attitudes, and consequences ranging from healthy/normal (enabling) to dysfunctional/neurotic (disabling). New studies by research psychologists (Goleman, 1996) indicate a growing group of experts who view perfectionism on this continuum. For some gifted adolescents, perfectionism is a healthy component of their lives resulting in growth and positive rewards; for others it is a destructive force with detrimental consequences. With a new realization about the construct of perfectionism, those in the field of gifted education will be able to help these students understand, appreciate, and cope with the many aspects of their perfectionism.

Generalizability and Limitations

The results of this study are expected to generalize to other gifted perfectionistic adolescents in rural environments. The findings are similar to those found by other researchers who have examined perfectionistic adolescents and adults as well as gifted adolescents. The results should be tested with other perfectionistic gifted adolescents in rural environments. Of particular interest would be an examination of perfectionistic tendencies in different subgroups (e.g., exceptionally gifted, athletically gifted, artistically or musically gifted).

The fact that one of the instruments (Goals and Work Habits Survey) used in this study was adapted from another (Multidimensional Perfectionism Scale) may be seen as a limitation. It is hoped that additional studies using the Goals and Work Habits Survey will provide further evidence of its reliability and validity.

Significance of the Study

The systematic approach on the present study focused on the behaviors, attitudes, and experiences of perfectionistic gifted adolescents. This study extends the understanding of perfectionism in gifted adolescents by confirming theoretical propositions that perfectionism is a characteristic of many gifted adolescents, and that manifestations of perfectionism can be healthy/normal or dysfunctional/neurotic. By discovering how and where these gifted adolescents directed their perfectionistic tendencies and the feedback they received, a better understanding of perfectionistic patterns was found. Information about the influences within the rural environment in which these gifted perfectionistic adolescents live adds to the limited research base on the psychosocial development of rural gifted students. These results provide a basis for development of strategies for school personnel, parents, and counselors to use with gifted perfectionistic students.

Participant Advice About Perfectionistic Tendencies

General

All of the participants were asked what advice they would offer to parents, teachers, and counselors about adolescents like themselves who had perfectionistic tendencies. All had definite opinions, except for Bob and Fred.

Most of the participants decided to compartmentalize their advice; a few offered general recommendations. The following opinions typify their urgings:

> Not to place much emphasis on things that aren't important, because when you're a perfectionist, the smallest thing can consume you.
>
> To try your best and to expect them to succeed and to have them try their best, but also expect them to be able to be a kid . . . . Expect success, but also expect freedom. Expect them to do something that they want to do, and not to be too driven.
>
> Use their imaginations to be more creative teachers, more creative parents, and more creative counselors.

Being perfectionistic was not always easy for these participants. They wanted everyone to know that sometimes it was difficult for them:

> Accept that they (students) are doing the best they can, and even if it isn't as high as people would like it, that at least they're working very hard and they're reaching toward their goals.
>
> That sometimes it can be frustrating because we don't want to do our best sometimes. We're not always the best at everything, even though they may think it.

Parents

Advice to parents was similar for both clusters, including: be more understanding, do not expect perfection, help us set standards and do our personal best, appreciate when we do well—just don't expect it, and don't be too picky, and to

> be careful what they say to their kids, because a lot of times they don't realize how much impact it has on them.

Many of the participants became more intense as they vocalized their opinions. The following admonition for parents by a healthy perfectionist was representative of the participants who were especially ardent in their views,

> . . . really support a smart kid. Especially since they're different. Because they're stuck with something they can't get rid of.

Teachers

Advice to teachers was no less vehement. The majority of the participants stated that they wanted more challenge, either by making tests harder, having different classes for really bright kids, starting accelerated classes in sixth grade, or giving more individual challenge.

They encouraged teachers to have high standards, but to be more understanding about the kind and amount of work they gave. Several of the participants urged the teachers not to expect perfection either from them or themselves.

Counselors

The majority of the participants had little or no contact with the school counselors. A few had contact through the Study Buddy program, advisory group, or special counseling group. Most viewed the counselors as those who only helped students with serious problems. Only two participants had specific advice for counselors:

> Well, people who are perfectionists usually get worried very easily. So if they were taught a couple of methods to use for anxiety, that might help a little bit. Teach relaxation techniques in elementary school. Just be there . . . for whenever anybody might need you. And just to remember that. And comfort, because everybody doesn't have to be perfect all the time.

Understanding, encouragement to do one's personal best, and more challenge were the main recommendations these participants offered to their parents, teachers, and counselors.

Additional Suggestions

Perfectionism is a trait that exists on a continuum with definite behaviors and attitudes. It is not a problem to be cured, but a trait that can be beneficial or harmful. Hamachek (1978) posed a question that, slightly reworded, is pertinent to this study: "What can we do to help our *gifted adolescents* move away from the neurotic end of the perfectionistic continuum?" (p. 32). Parents, educators, and counselors need to examine various interventions and strategies to help perfectionists, no matter where they are on the perfectionism continuum, to cope with its consequences. The following strategies to help perfectionistic gifted students in a rural environment, especially those who are dysfunctional perfectionists, are divided into several overlapping categories: parents, educators, counselors, and the school environment. All of the suggestions support the four specific goals that Hamachek delineates to reduce dysfunctional/neurotic perfectionism:

1. Be task selective.
2. Give yourself permission to be less than perfect.
3. Set reasonable, reachable goals for yourself.
4. Choose at least one activity you can do without criticizing yourself. (p. 33)

Parents

Parents can help their perfectionistic gifted adolescents manage their perfectionism and meet these goals in a variety of ways. The following suggestions are a compilation of recommendations by educators, psychologists, and therapists in the field of gifted education (Cohen, 1996; Cohen & Frydenberg, 1996; Jenkins-Friedman et al., 1988; Katz, 1982; Kerr, 1991; Lind, 1992; Pyryt, 1994; Roeper, 1982; Silverman, n. d., 1986; Walker, 1991). Recommendations include:

1. Recognize that your gifted adolescent's intellectual and emotional characteristics are intertwined and influence each other. Understand that the personality trait of perfectionism is influenced by factors in your child's environment that impact whether or not the manifestations will be healthy or

dysfunctional. Know that perfectionism can be a positive motivator or be a cause of stress for your adolescent. Sensitize yourself to your gifted adolescent's pressures, at home and at school. Talk with your adolescent about what perfectionism means to you and him/her.

2. Understand and appreciate perfectionism as a personality trait that you may have as well as your adolescent. By recognizing the positive and negative components of perfectionism, you can help your child or adolescent pursue excellence, by modeling appropriate responses. Point out positive, imperfect role models in the media to help them understand that no one can be perfect.

3. Learn to set priorities in your life and help your adolescent to do likewise. Help your adolescent to realize that making mistakes is a learning experience. Model acceptance of your mistakes. Ask, "What did I/you learn from the experience?" Teach the concept of "constructive failure" whereby future improvement is dependent on present performance.

4. Set high but realistic standards for yourself. Help your adolescent to have high standards for her/himself, but not to expect others to conform to them. Help your adolescent to understand that time, effort, and not giving up will help him/her reach his/her high standards.

5. Help your adolescent understand that intense frustration and the pain of perfectionism can motivate him/her to become problem-solvers, hard workers, and emotionally healthy. Help him/her to understand that negative emotions are not only normal but need to be expressed in healthy ways.

6. Work with your gifted adolescent to improve self-evaluation skills. Emphasize process and improvement rather than perfect products to encourage intrinsic locus of control. Praise efforts not just successes. Help him/her to understand that worth is not based on others' evaluations of work, but that each student is responsible for his/her behaviors and the consequences.

7. Show your adolescent that he/she has inherent dignity and self-worth, which are unconditional. Avoid comparisons with siblings or peers. Teach compassion for those who are less able.

8. Recognize, support, and nurture your adolescent's interests or passions that bring enjoyment to him or her. Provide time for creative activities and risk taking with safe opportunities to fail. Focus on the joy of discovery, use humor, and have fun with your adolescent.

9. Teach your adolescent that health is important. Don't let study interfere with eating and sleeping. Encourage relaxation strategies such as creative visualization.

10. Seek professional counseling if your gifted adolescent is unable to act or becomes fearful of rejection.

Teachers

Teachers can serve many roles in advising and supporting gifted adolescents, but first they must be well informed about the intellectual, social, and emotional issues of gifted

children and adolescents. Because they are integrally involved with their students' educational growth, teachers can be advocates for students who have special educational, social, and emotional needs. As an observer/diagnostician, a teacher is perhaps the first educator to notice a gifted adolescent's academic and psychological performance levels. This assessment information can be used to provide educational programming and to make referrals to school counselors. Classroom guidance activities can be conducted by teachers in partnership with counseling and guidance staff. Teachers can play a critical role in listening to, advising, instructing, and being a role model for gifted adolescents. Facilitating student progress by recognizing individual needs and providing curricular options such as individual projects, mentors, and special classes is a major role that teachers should furnish for gifted adolescents. In addition, they can serve as consultants with parents by providing information that will help create a partnership in serving the gifted adolescent's needs (Parke, 1990).

Teachers can play a significant role in the manifestation of a gifted adolescent's perfectionistic tendencies. School may be a refuge for some of these students to learn how to cope with their perfectionism. As Csikszentmihalyi et al. (1993) stated, "If a home environment fails to provide a place where the enjoyment of productive work can be learned, teachers may represent the last chance for many students to find a path with a heart" (p. 249).

Recommendations for teachers to recognize and assist perfectionistic gifted adolescents encompass the goals Hamachek (1978) expressed, but the avenues to implement them are specific to school settings. The following suggestions address this issue and include a summary of recommendations found in the literature (Adderholdt-Elliott, 1991; Alvino, 1985; Barrow & Moore, 1983; Baum, Owen, & Dixon, 1991; Beery, 1975; Bransky, 1989; Brophy, 1989; Buescher, 1990; Cohen, 1996; Cohen & Frydenberg, 1996; Heacox, 1991; Hébert, 1995; Howard-Hamilton & Franks, 1995; Jenkins-Friedman et al., 1988; Renzulli, 1994; Renzulli & Reis, 1985):

1. Educate yourself about the intellectual characteristics and the social and emotional issues of gifted adolescents. Understand how their perfectionism, sensitivity, and intensity can be helpful or harmful to them.

2. Learn and recognize the manifestations of perfectionism when it becomes stressful: a delayed start, an unwillingness to share work, refusal to turn in work or accomplish a goal; an inability to tolerate mistakes; and impatience with others' imperfections (Cohen, 1996).

3. Expect excellence but not perfectionism from your students; talk with your students about the difference. Examine your own behaviors that encourage perfectionism. Don't compare one student's performance with another's or a sibling's.

4. Encourage and role model the principle "dare to dream." Talk with your students about how high standards can serve as motivators. Share how you have handled failure and successes in your own life. Use biographies of famous people in all subject areas to illustrate overcoming failures. Study an expert's changing arguments or styles over time to illustrate how an individual's ideas evolve.

5. Teach the skills of task analysis, time management, and goal setting in your classrooms. This will help the perfectionist to understand the value of more manageable steps.

6. Teach and use the creative problem solving process. Encourage and reward creativity in thought and product. Gifted perfectionists need opportunities to use their creative abilities within a structured framework that is applicable beyond the classroom.

7. Use specific criteria for assignments, projects, or products created by other students. Show your students exemplary products that other students have created. This will help the perfectionist to set realistic goals and not be overwhelmed in thinking they have to produce beyond their capabilities.

8. Help perfectionistic students to shape their thinking by setting goals and expectations prior to classroom assignments, to deal with situations as they work, and to evaluate their work during and after it is finished. Use contracts to encourage underachieving gifted perfectionists to finish or share their products.

9. Provide opportunities to fail in a safe environment. Introduce gifted perfectionistic adolescents to new experiences so they can learn to take risks. Focus on open-ended activities. Offer more choices so that they don't always choose the things at which they are most successful. This is helpful for those perfectionists who take no chances and who go through enormous effort to ensure their success.

10. Try not to grade all assignments; use pass/fail at times. Provide rewards that are connected to improvement, not perfection. Limit the use of extra credit work; perfectionists like to go above and beyond for an A+ grade, even if they are struggling in the subject.

11. Focus on the perfectionistic gifted adolescents' strengths and successes, not on the mistakes they make. Be careful about criticism because it can add to their own self-criticism for not being the perfect student.

12. Be aware of gifted female adolescents putting more pressure on themselves to perform, and how teasing about being smart and/or perfectionistic is especially harmful to gifted male adolescents. Work to create a non-sexist environment and curriculum.

13. Use humor in the classroom: create a "Humor" bulletin board; discuss types of humor; have a joke of the day; incorporate humor in writings and problems; use humor instead of punishment; laugh at yourself.

14. Learn techniques that are beneficial for gifted learners (e.g., curriculum compacting, ability grouping, acceleration opportunities). Modify and adapt current curriculum to provide more challenge.

15. Use educational therapy techniques to address social and emotional issues: bibliotherapy, biography, journal writing, art, music, film, simulations and role playing, inquiry-based class, small group discussions, small group projects based on human behavior (e. g., creative individuals).

Counselors

While gifted adolescents have the same basic needs as all children for the fulfillment of physiological needs, love, security, and esteem (Maslow, 1970), they also have issues that

are unique because of their high abilities. Because developmental counseling is concerned with the growth of the child, it would seem that it is essential in meeting the additional social and emotional needs of gifted and talented adolescents. Counseling for them should take place within a developmental program, but it should be structured around their special guidance needs. Objectives for the social and personal development of gifted adolescents, in light of their high intellectual and talent abilities as well as their unique issues (Buescher, 1987), might include the following:

1. Recognize and accept one's own strengths and weaknesses, and learn that one may not be superior in all endeavors;
2. Develop an appreciation for similarities and differences between oneself and others;
3. Develop a healthy sense of oneself as a continual process of growth;
4. Develop skills in social adaptation; develop a cooperative spirit;
5. Develop a sense of acceptance of mistakes; develop a reduction in fear of failure;
6. Develop methods of using stress and frustration in creative ways;
7. Analyze personal problems;
8. Develop brainstorming and problem solving skills;
9. Become self-directive and responsible for one's behavior;
10. Develop and acquire a positive attitude toward learning, school, community, and society;
11. Learn to share one's abilities and receive help from others, regardless of their abilities;
12. Develop a sense of humor as a positive tool in acceptance of self and others;
13. Develop a love of exploration, creativity, and discovery (Blackburn & Erickson, 1986; Culross, 1982; VanTassel-Baska, 1990).

These objectives encompass the concerns about perfectionism that are apparent in the present study. Dissonance and others' expectations were paramount issues for the gifted perfectionistic adolescents. The participants had many similar concerns to those Galbraith (1983) discovered after interviewing 400 gifted students. Their "Eight Great Gripes" included: (a) the stuff we do in school is too easy and it's boring; (b) parents, (teachers, friends) expect us to be perfect, to "do our best" *all* the time; (c) friends who really understand us are few and far between; (d) lots of our coursework is irrelevant; (e) peers often tease us about being smart; (f) we feel overwhelmed by the number of things we can do in life; (g) we feel too different, alienated; (h) we worry a lot about world problems and feel helpless to do anything about them" (p. 17).

One of the first goals counselors must do in working with gifted adolescents is help them understand that counseling is more than just working with "other kids" who have problems. In this study most of the participants had little or no contact with their school counselors. Hewitt (as cited in Goleman, 1996) stated that perfectionists often will seek help only when they are in extreme crisis due to experiences that typically accompany dysfunctional perfectionism: interpersonal difficulties, procrastination, anxiety, and depression. If this is the case, then it is critical that school counselors establish relationships with gifted adolescents as soon as they enter middle school. Parent questionnaires and examinations of cumulative school records may show indications of perfectionistic tendencies and consequences.

Different therapeutic models have been recommended as effective counseling approaches for dysfunctional perfectionism. Reality therapy (Glasser, 1975) helps perfectionists deal with past mistakes and focus on future opportunities. This approach helps perfectionists to accept the reality of what they cannot change, assume responsibility

for one's own behavior, and establish meaningful relationships. Borgers (1980) recommends using reality therapy in the classroom with gifted students. This approach would help gifted perfectionists focus on their present behavior, evaluate their behavior, plan more responsible behavior, make reasonable commitments, accept no excuses, and accept the natural consequences of their behaviors.

Rational-emotive therapy (Ellis, 1962) has been recommended for use with perfectionists (Berger, 1974; Borcherdt, 1989). Roberts and Lovett (1994) suggest incorporating rational-emotive education strategies as part of a primary prevention program for the gifted. Such a program includes activities focusing on self-acceptance, understanding feelings, and examining personal beliefs. Skills are taught to help gifted adolescents restructure unhealthy perfectionistic goals and yet maintain high self-expectations at a healthy level. Counselors assist gifted perfectionistic adolescents to go from irrational beliefs of musts, shoulds, and oughts to wishes or preferences.

The formation of counseling groups for gifted adolescents that meet regularly to discuss problems and issues related to their social and emotional development has proven to be a worthwhile strategy (Allan & Fox, 1979; Klima, 1984; Peterson, 1989; VanTassel-Baska, 1990). Counseling groups remove gifted adolescents from competitive academic environment and provide the opportunity for them to experience a less judgmental affective realm (Colangelo & Peterson, 1993). The use of special units within counseling groups is an effective method in helping gifted adolescents. Peterson (1989, 1993) offers suggestions for group sessions with gifted adolescents in which perfectionism is seen as a blessing or a curse, feelings and behaviors about perfectionism are articulated, alternatives to perfectionism are examined, sources of perfectionism are explored, and strategies for combating perfectionism are brainstormed.

Group interventions in a therapeutic setting have been suggested for perfectionists (Barrow & Moore, 1983; Broday, 1989). Counselors focus on the cognitive patterns or perfectionistic thinking of the perfectionistic adolescents and the possible problems that result. The goals are similar to those of Hamachek (1978): (a) setting realistic goals and standards; (b) differentiating the construct of self-worth from performance; and (c) developing a cognitive coping process to moderate and control initial perfectionistic responses (Barrow & Moore).

Wilbur, Roberts-Wilbur, and Betz (1981) offer a framework for group counseling that middle school counselors can use for gifted perfectionistic adolescents. Three group modalities are included within this framework. The focus of the Task-Process Group is to solve problems by accomplishing a task, completing a project, or producing a product. In a Task-Process Group with perfectionistic gifted adolescents, an initial activity might be to create a story, a skit, or a mural about a "perfect" place. Participants may realize through this activity that there is no absolute standard for perfection, because each individual's perception is based upon his/her personal values (Roberts & Guttormson, 1990).

The purpose of the Socio-Process Group is "attitude exploration, modification, and change" (Wilbur et al., 1981, p. 28). In a Socio-Process Group for perfectionistic gifted adolescents, their values, beliefs, and attitudes about perfectionism are examined. Peterson (1993) provides a format for such a group. Introductory questions might be, "What is something you always feel you have to do perfectly?" "What is good about perfectionism?" "What is bad about perfectionism?" From the responses, a discussion follows about, "What's the worst thing that could happen if you didn't do that particular thing perfectly?" Sources of their perfectionism are explored: "If you're a perfectionist, where do you think your perfectionism comes from? Does the 'push' to be perfect come from within you, or from others? If from others, what do they say?" (Peterson, pp. 40-43). Brainstorming

strategies for combating perfectionism follows. Wilbur et al. state that the Socio-Process Group enables participants to move from an emotional involvement to a more rational discussion of their attitudes. This type of group would help perfectionistic gifted adolescents understand and modify their irrational beliefs and attitudes about perfectionism.

The Psycho-Process Group is intended for those who are mildly distressed to the acutely disturbed. Because the purpose of this group is to change or modify self-defeating behavior, participation in this type of group would be most beneficial for the dysfunctional perfectionists. The dynamics of the group are used to focus on the self-defeating behaviors in the group.

In the present study all of the participants were asked if they would participate in a group for students like themselves to discuss issues they may be facing. A majority responded positively, and said that they would welcome such an opportunity. The use of the three group modalities as suggested by Wilbur et al. (1981) would provide an excellent framework for counseling groups with these perfectionistic gifted adolescents.

Although shrinking school budgets have forced the disappearance of many programs for the gifted, school counselors can provide a leadership position in helping gifted adolescents through the framework of existing counseling programs. Counselors, teachers, and parents need to work in a collaborative team effort to meet the exceptional issues of the gifted adolescent. The counselor, then, has unique roles to play: guidance specialist, consultant, researcher, listener, advisor. Serving as an information link, the counselor can be the key player in making environmental modifications for the gifted adolescent. Counselors must help dispel the myth that highly able students need little assistance because they will make it on their own.

If school counseling personnel are to become advocates for gifted adolescents, they must become knowledgeable about these students. Counselors must obtain the necessary training and skills in identifying and counseling this neglected minority. They need to keep abreast of current research concerning the counseling needs of gifted adolescents. Graduate programs in counseling or clinical psychology need to offer specialized training and experience in gifted education. In addition, funding for gifted and talented programs must be made available to attract professional counselors and researchers to work with these students who have exceptional needs.

School Systems

Many school systems ignore the developmental needs of their gifted, and only focus on their intellectual abilities. There is a greater need for attention to the social and emotional issues affecting gifted adolescents, especially during this transition time in their lives. The impact of home and school environments must be acknowledged and understood along with the intricacies of their inner worlds. Passow (1992) noted how the environmental problems in a school, such as an insufficiently challenging or interesting curriculum, can leave gifted adolescents bored, resentful, or underachieving. Intrapersonal problems of self-concept, self-acceptance, and self-esteem may lead to dysfunctional behaviors or inappropriate coping strategies within the school environment.

The administrator is in a unique position to supply leadership in establishing and maintaining program options for gifted adolescents in the school setting. By working to see that these students are appropriately served and that funding is available to finance programs, the administrator can be an institutional advocate in making sure that counseling is an integral part of their instructional program. Administrators can also demonstrate that providing services to gifted adolescents requires a collaborative effort by offering inservice

to all staff on the characteristics, issues, and appropriate programming needs of gifted students (Olenchak, 1995). As the program leader, the administrator can serve as a consultant to parents and community members. In addition, the administrator can provide direct services to gifted adolescents by assuming the role of listener and advisor.

Because middle school program recommendations are generally based on what is appropriate for the majority of adolescents in this age group, the needs of gifted adolescents are often overlooked or ignored. Recently, resolutions by the National Middle School Association and a position paper on middle schools from the National Association for Gifted Children (as cited in Council for Exceptional Children, 1996) have stressed the need for middle schools to respond to the unique needs of gifted adolescents. Administrators need to be aware of the collaboration between these two groups and the positive recommendations that are offered.

Participants in the present study offered suggestions on how to provide the challenge they craved in their classrooms, including programming options such as: more accelerated courses that started in sixth grade, more individual challenges, ability grouping some classes, making tests and assignments more interesting and challenging, more time to explore their interests, and meeting in small groups to discuss their issues as gifted adolescents. Their responses are identical to those programming options found in the literature on what is appropriate to meet their needs: higher level curriculum in their areas of special talent or strength, the challenge of working with other high ability peers, faster pace of instruction, in-depth research, and group counseling opportunities (VanTassel-Baska, 1990).

Rural school systems similar to Eastern School District with middle schools like Brenan Middle School can meet the cognitive, social, and emotional needs of gifted adolescents. Five specific suggestions include:

1. Examine research studies that include collaboration between middle school goals and the best practices for gifted adolescents. Studies, similar to the one conducted by Elmore and Zenus (1994) which investigated the social and emotional development of middle school gifted students using cooperative learning, are particularly important. Contact and visit other rural school districts that have successfully implemented programs for gifted adolescents.

2. Train *all* staff on the characteristics and issues of gifted adolescents, and implement the recommended educational and counseling practices that are necessary to meet their needs. Use a variety of methods to identify gifted adolescents.

3. Provide educational flexibility for gifted adolescents in the middle school: appropriately differentiated curricula in heterogeneous classes, concurrent enrollment, combined enrollment, continuously paced instruction, guided independent study, mentorships, out-of-school acceleration, and specific gifted and talented programs (Erb, 1992; Renzulli & Reis, 1985; Tomlinson, 1994c; Webb, 1994).

4. Implement a counseling component for gifted adolescents within the existing counseling program. Offer small group discussions on salient issues, such as perfectionism, and training on coping strategies, social skills/peer relationships, and time management skills. Counselors and teachers need to collaborate on strategies that can be implemented in classrooms.

5. Communicate with parents and the community. Offer workshops about gifted education to the community. Morton and Workman (1981) stated, "Prevention of serious emotional disturbance within gifted children lies in increasing the awareness of parents, educators, and the gifted children as to the uniqueness possessed by the gifted and addressing their needs appropriately" (p. 459). When the community, educators, counselors, and parents obtain an in-depth knowledge and understanding of gifted students, there will be a greater public acceptance of programs and provisions to develop talent and intelligence of all students.

Conclusion

Kieran's response to the question, "What are your thoughts about being interviewed for this study?" was representative of many of the participants:

> I think it's good. I think it helps people to know what high ability kids have to say, because normally teachers don't really pay attention to us because they think we're doing fine. They give more attention to kids who are struggling, but I feel this will help them to understand that we have problems, too.

His remarks are more powerful, however, because when he sent his transcription back, he added in his neat, precise handwriting, "I strongly agree to the statement I made."

When the research began on this study, an overriding question during the participant interviews was, "What are the students saying?" Throughout the interviews the gifted adolescents shared social, emotional, interpersonal, and intrapersonal difficulties that were related to their perfectionism. It appears that many of these perfectionistic gifted adolescents are distressed by their own and others' expectations, set very high standards for themselves, and experience intense guilt and frustration when they make mistakes or fail. They are burdened with the amount of work they receive, and spend innumerable hours perfecting unchallenging tasks. Many have rarely experienced the "joy of struggle" in their classrooms, yet continue to be driven by the external reward of high grades. Their needs for intellectual challenge, while learning coping, creative problem solving, and relaxation strategies, emerged in this study.

Whether perfectionism is an innate drive or a learned behavior or a combination of both, its multidimensional nature was seen through the perceptions of the gifted adolescents. They clearly communicated what the manifestations of perfectionism are like for a gifted adolescent in a rural environment. It is essential that school systems, administrators, teachers, counselors, and parents listen to their voices.

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Appendix A

Goals and Work Habits Survey

Goals and Work Habits Survey

(Schuler, 1994)

Directions: This questionnaire asks about how you think and feel about your goals and work habits. Your answers will be kept secret. The information you provide will help us better understand students. There are no right or wrong answers. Please answer EVERY question, but give only ONE answer for each question. COMPLETE BOTH THE FRONT AND BACK OF THIS FORM.

Information About You

Please CIRCLE the best answer to each question about you.

1. Which are you? Boy Girl
2. Are you . . . ? White Black Hispanic Asian Other
3. Which grade are you in? 6th 7th 8th
4. How many brothers and sisters do you have? (other than yourself)
   0 (only child) 1 2 3 4 or more
5. Are you . . . ? The oldest In the middle The youngest

Goals and Work Habits

Please CIRCLE the number that best corresponds to your agreement with each statement below. Use this rating system:

1 = Strongly Disagree 2 = Disagree 3 = Neutral 4 = Agree 5 = Strongly Agree

		SD	D	N	A	SA
1.	My parents set very high standards for me.	1	2	3	4	5
2.	Organization is very important to me.	1	2	3	4	5
3.	I have been punished for doing things less than perfectly.	1	2	3	4	5
4.	If I do not set the highest standards for myself, I am likely to end up a second rate person.	1	2	3	4	5
5.	My parents never try to understand my mistakes.	1	2	3	4	5
6.	It is important to me that I be thoroughly competent in everything I do.	1	2	3	4	5
7.	I am a neat person.	1	2	3	4	5
8.	I try to be an organized person.	1	2	3	4	5
9.	If I fail at work/school, I am a failure as a person.	1	2	3	4	5
10.	I should be upset if I make a mistake.	1	2	3	4	5

Please turn paper over to continue

Adapted and used with permission from Frost, Marten, Lahart, and Rosenblate (1990).

1 = Strongly Disagree 2 = Disagree 3 = Neutral 4 = Agree 5 = Strongly Agree

		SD	D	N	A	SA
11.	My parents want me to be the best at everything.	1	2	3	4	5
12.	I set higher goals than most people.	1	2	3	4	5
13.	If someone does a task at work/school better than I, then I feel like I failed the whole task.	1	2	3	4	5
14.	If I fail partly, it is as bad as being a complete failure.	1	2	3	4	5
15.	Only outstanding performance is good enough in my family.	1	2	3	4	5
16.	I am very good at focusing my efforts on attaining a goal.	1	2	3	4	5
17.	Even when I do something very carefully, I often feel that it is not right.	1	2	3	4	5
18.	I hate being less than best at things.	1	2	3	4	5
19.	I have extremely high goals.	1	2	3	4	5
20.	My parents expect excellence from me.	1	2	3	4	5
21.	People will probably think less of me if I make a mistake.	1	2	3	4	5
22.	I never feel like I can meet my parents' expectations.	1	2	3	4	5
23.	If I do not do as well as other people, it means that I am an inferior being.	1	2	3	4	5
24.	Other people seem to accept lower standards from themselves than I do.	1	2	3	4	5
25.	If I do not do well all the time, people will not respect me.	1	2	3	4	5
26.	My parents have always had higher expectations than I have.	1	2	3	4	5
27.	I try to be a neat person.	1	2	3	4	5
28.	I usually have doubts about the simple everyday things I do.	1	2	3	4	5
29.	Neatness is very important to me.	1	2	3	4	5
30.	I expect higher performance in my daily tasks than most people.	1	2	3	4	5
31.	I am an organized person.	1	2	3	4	5
32.	I tend to get behind in my work because I repeat things over and over.	1	2	3	4	5
33.	It takes me a long time to do something "right."	1	2	3	4	5
34.	The fewer mistakes I make, the more people will like me.	1	2	3	4	5
35.	I never feel like I can meet my parents' standards.	1	2	3	4	5

Appendix B

Empowering Gifted Behavior Scale

Empowering Gifted Behavior Scale
(Jenkins-Friedman, Bransky and Murphy, 1986)

STUDENT'S NAME _____

Subject(s) for which you have student _____

D	1.	Sees things as "black" or "white" (either devastating or wonderful)	1 2 3 4 5 6 7	Sees things in shades of "gray" E
D	2.	Sets unrealistically high or unchallengingly low	1 2 3 4 5 6 7	Sets goals that can be met with effort E
E	3.	Separates desires from demands on self	1 2 3 4 5 6 7	Makes desires into demands on self (I'd <u>like</u> to get an A = I must get an A) D
D	4.	Wants to reach goal immediately; impatient with intermediate steps	1 2 3 4 5 6 7	Works patiently in stages toward a goal E
E	5.	Pleased with own accomplishments	1 2 3 4 5 6 7	Ignores own accomplishments; dwells on "failures" D
E	6.	Accepts being average in an important activity	1 2 3 4 5 6 7	Embarrassed to be average in an important activity (academic, athletics, leadership) D
D	7.	Rejects or is hurt by constructive criticism	1 2 3 4 5 6 7	Accepts and uses constructive criticism E
E	8.	Neatness, completeness, correctness is appropriate for the task	1 2 3 4 5 6 7	Insistent (even compulsive) about neatness, completeness of work D
D	9.	Avoids activity in which he/she might fail	1 2 3 4 5 6 7	Risks failure; accepts and learns from failure E
E	10.	Doesn't delay unpleasant or difficult tasks	1 2 3 4 5 6 7	Has difficulty getting started; procrastinates D
E	11.	Completes tasks as promised	1 2 3 4 5 6 7	Is inconsistent about follow-through D

<u>Note.</u> E = Enabling Behavior D = Disabling Behavior

Used with permission from Jenkins-Friedman, Bransky, and Murphy (1986).

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